

Vol. XX.

No. 6

THE CANADIAN NURSE AND HOSPITAL REVIEW

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Trained Nurses

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THE CANADIAN NURSE

A Monthly Journal for the Nursing Profession in Canada

Editor and Business Manager.....MISS HELEN RANDAL, R.N.

VOL. XX.

VANCOUVER, B. C., JUNE, 1924

No. 6

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Additional Members of Executive: Chairman, Public Health Section, Miss Florence Emory,
26 Algonquin Avenue, Toronto, Ontario; Chairman, Private Duty Section, Miss Edith
Gaskell, 397 Huron Street, Toronto, Ontario.

Biennial Meeting Hamilton, Ont., June 23rd to 25th, 1924

The twelfth general meeting of the Canadian National Association of Trained Nurses, which is to be the first biennial meeting of the Association, will be held in Hamilton, Ont., from June 23rd to 25th, inclusive.

The meeting will be held in the Hotel Connaught, where, in addition to a large assembly hall, the local committee have arranged with the hotel management for the use of several committee rooms and a hall for the exhibits.

Members are advised to write the Manager, Hotel Connaught, for reservations.

The Convenor of the Programme Committee reports that, owing to a change of plans, Miss Eldredge will be unable to be present on the opening night, when she was to address the joint meeting. This announcement will be most disappointing to the members of the C.N.A.T.N. and the C.A.N.E., as we were looking forward with much pleasure to meeting Miss Eldredge and hearing her address on International Relations in the Nursing Profession.

PROGRAMME

MONDAY—

8.00 a.m. Registration

9.00 a.m. Executive Committee Meeting.

10.30 a.m. Business Session.

Reading of Minutes.

President's Address.

Reports—

Hon. Secretary

Executive Secretary.

Treasurer.

Standing Committees.

Programme.

Arrangements.

Membership.

Publication.

Nursing Education.

Appointment of Resolutions Committee.

Appointment of Scrutineers.

2.00 p.m. Report of "Canadian Nurse" Magazine.

Report of Special Committees.

Report of Representatives to—

N. C. of W., 1923.

C. C. C. W., 1923.

S. S. C. C., 1924.

8.00 p.m. Joint Session of C.N.A.T.N. and C.A.N.E.

Invocation.

Address of Welcome.

Reply to Address of Welcome.

Address: Miss Eldredge, Miss Mary Beard, Miss Reimann,
Miss Dyke.

TUESDAY—

9-9.30 a.m. Registration of Delegates.

12.30 p.m. Public Health Session.

Address: Convenor of Section.

Report of Committees on Programme.

Minutes of last Annual Meeting.

Secretary's Report.

Correspondence.

Appointment of Committee on Resolutions.

Business arising from Minutes, Reports and Correspondence.

Report of Public Health Nursing Progress, 1922-24, including activities of the Public Health Section and synopsis of Provincial Reports.

"A Public Health Programme for the Pre-school Child," by Miss M. Beard, R.N., Director of Community Health Association, Boston, Mass.

Report of Committee on Publication, Miss M. Wilkinson.

Report of Committee on Education, Miss K. Cowan.

Election of Officers.

Unfinished Business.

2.00 p.m. New Business.

Discussion of Reports.

Address: "Red Cross Course on Home Nursing."

Unfinished Business.

8.00 p.m. Reception by Hamilton Nurses' Association.

WEDNESDAY—

9.00 a.m. Unfinished Business.

New Business.

9.30 a.m. Private Duty Session.

(a) Round-table discussion of plans and problems of our section.

(b) Minutes of last Annual Meeting.

(c) Secretary's Report.

(d) Reports of Special Committees.

(e) Report of Publication Committee.

(f) Report of Committee on Resolutions.

(g) Election of Officers.

(h) Unfinished Business.

2.00 p.m. Report of Federated Association.

Elections.

Appointment of Convenors of Committees 1924-1926.

Report of Resolutions Committee.

INFORMATION SUPPLIED BY THE CANADIAN PASSENGER ASSOCIATION RE
SPECIAL RATES FOR MEMBERS ATTENDING THE BIENNIAL MEETING

From the Secretary, Eastern Division, C.P.A.:

Going tickets *with certificates* will be issued June 19th to June 25th, inclusive, and properly validated certificates will be honored for tickets for the return journey up to and including July 2.

From the Secretary, Western Division, C.P.A.:

Going tickets *with certificates* will be issued June 18th to June 24th, inclusive, return limit July 2nd, from all points west of Port Arthur and Armstrong, Manitoba, Saskatchewan and Alberta. From points in the province of British Columbia, summer tourist fares will apply.

Persons attending must purchase one-way ordinary first-class adult fare tickets (fare for which must not be less than 75 cents) to the place of meeting, and *secure certificate to that effect on Standard Convention Certificate form*, which must be presented to the Secretary, C.N.A.T.N., at the place of meeting immediately upon arrival.

Ticket agents are supplied with Standard Convention Certificates and are instructed to issue them on application.

The Special Agent will be present on June 25th and 27th to validate certificates for the return trip.

If certified attendance is 150 or more, one-half ordinary first-class fare plus 25 cents will be the fare for the return trip. If certified attendance is 149 or less, four-fifths one-way ordinary first-class fare plus 25 cents will be the fare for the return trip.

Owing to the races taking place in Hamilton during the week of the convention, nurses are urged to make reservations at the hotel at once. The Hotel Connaught management has agreed to reserve two floors for the nurses, if applications for the rooms are in reasonable time.



ONIONS AS A REMEDY FOR ASTHMA

The onion, possibly because it is so cheap and common a vegetable, is despised by many people; but it is most useful in several ways. As a mild soporific it is well known, but not so generally as an expectorant. In the *Medical Press* there appears a recipe for "onion porridge" which has been used by five generations of one family for the relief of hereditary bronchial asthma. It is made thus:—"Take an onion (not too large), peel off the outer dry skin, cut it in thin slices, and stew gently in one pint of milk for one hour. Take this at bedtime with a slice of toast."

Some Considerations of Venereal Disease

In view of the suggested reduction of the grant by the Dominion of Canada for the purpose of combatting venereal diseases, a few suggestions may be appropriate.

We all know the strong feeling of indignation which Canadians and the civilized world generally have against the Germans, arising from their attempt to obtain the mastership of the world. Canada, with other civilized nations, strained her resources, material, financial and human, to the utmost to meet this world peril and to retain her liberty. She placed under arms 600,000 young Canadians, and of these some 60,000 made the supreme sacrifice of their lives on behalf of Canadian freedom and democracy. This terrible sacrifice Canada feels every day and every hour; she feels it in every walk of life, in every part of business—there is not a single interest which does not feel the loss occasioned by this drainage of her man-power.

All this is commonplace and generally known; but there is something of tremendous importance which is not known to everyone, although it should be.

The discoveries of two German doctors to identify and to cure syphilis are of as great significance to Canada as was the war forced on her by the German government. If the discoveries of these two German doctors were faithfully and universally applied, the loss of man-power occasioned by German armies would be recouped within a very few years, certainly far within ten years; and they would not require one one-hundredth part of the expense incurred by Canada in the war.

If this thought were constantly borne in mind, is it conceivable that every means should not be used to apply these discoveries and thereby reinstate our manhood?

Over 28,000 new cases of venereal disease were reported in Canada in 1923; it is probable that three times that number of cases occurred, because it is common knowledge that all medical men do not report these diseases in every case. The proper treatment of these 28,000 cases alone would make an appreciable increase in the man-power of the Dominion.

Suppose, instead of 28,000 humans being attacked by disease, it had been the case of 28,000 pigs which had been so attacked, would not the whole Dominion be alarmed and would it not insist that every means should be taken to combat the disease which so attacked our pigs, part of our material resources? Are human beings not of greater value than pigs?

There is another matter which is worthy of consideration. The Dominion of Canada is straining every effort to bring in immigrants. All proper means of stimulating immigration are being employed and at

a great expense; no pains are considered too great to cause the influx of immigrants into Canada. But these immigrants are carefully examined for disease, and when found to be suffering with contagious disease, they are ruthlessly excluded from the country.

But that is immigration by way of the steamship; there is another immigration of as great and even greater importance—immigration by way of the cradle.

Without detracting in the least from the value of immigrants who come to our shores from across the seas or from across the international boundary, there is no Canadian who is of more value to Canada than the Canadian born, the Canadian from the beginning. Should it not be the part of the Government of Canada to take as great pains in respect to the health of the immigrant by way of the cradle as of the immigrant by way of the steamship? Every baby born is entitled to clean ancestry and to a clean body at birth. Is it not the duty of the Dominion to see to it that the baby is not defrauded of its just dues?

Can any call for economy deafen the ears of those responsible for the administration of public funds to the imperative demand for clean cradle immigration?

The work of purifying Canada of venereal disease has been well begun. If properly encouraged, it will continue with the result that hundreds of thousands of human beings will be bettered and Canada will be made more populous and more wealthy. Assuredly this is a work which calls for the earnest attention of everyone.



Preliminary announcement of a prize competition on the vitally important subject, "The Inter-relationships of Hospital and Community," is made by The Modern Hospital Publishing Co., Inc., in the June issues of the *The Modern Hospital* and the *Nation's Health*.

Three cash prizes of \$350, \$150 and \$100 will be awarded, and there will be such honorable mentions as may be authorized by the Committee of Awards.

The purpose of this competition is to concentrate the thought of hospital, public health, medical and social welfare workers on this timely subject for the purpose of crystallizing opinions and defining future objectives.

The general program for the competition may be obtained on and after June 1st from The Modern Hospital Publishing Co., Inc., 22 East Ontario Street, Chicago, Ill.

When giving alcohol rubs, put the alcohol in a toilet-water bottle with a sprinkler top. While sprinkling on the alcohol with one hand, rub the patient with the other—which will save both time and alcohol.

The Editor regrets that, owing to illness for the past six weeks, the June issue is unavoidably delayed.

Letter to The Editor



Nurses throughout the Dominion are wisely advised and will do well if they fall in line with our Editor's suggestions, as set forth in her Editorial in the April issue.

"A practical solution of a vexing question" is an apt term, nurses, to solve our own problems—a wise remedy. But first let us understand them, for the pity of it is that few are interested enough in that which vitally concerns them to open their minds to admit a working or workable knowledge, otherwise the problem that this issue presents would soon disappear or cease to be vexing. For, as Miss Randal has explained, the solution, though difficult, is within our grasp.

I trust that a summary of a few facts relating to such an important matter is in order at the present time. For instance, can we continue to ignore the most striking fact, namely, that the separate and distinct demand for distinction between this service and that of the Registered nurse? Further, apart from the problems that transportation creates, as it applies to a nursing service in rural and Urban districts, there is very little, if any, distinction in the difficulties that arise in supplying this demand in the Provinces or through the Dominion.

When an increase in the members of a family takes place, when illness or ill-health afflict its members, our household or home problems, irrespective of the type of home, can always be successfully met, first by supplying skilled workers to meet the degree of need, and second, by a supply of funds to finance the service rendered. Such requirements always have been and will be the basal or fundamental factors in a successful nursing service. The practical solution of this "vexed" question, therefore, evolves itself into skilled workers and finances, neither of which commodities should be lacking in a progressive Christian community.

The question, then, that confronts us is: Why the "vexed" question or the "unknown quantity, the practical," specially trained and undergraduates who "trade" and present themselves for tasks they have not been equipped to perform? Why, indeed? Except that old traditions die hard, and unfortunately one of the modern traditions in our health service is arranging the actual needs of the situation, and methinks this can be best explained by citing from the records of calls taken in an office that supplies the subsidiary or secondary service, for, while we may succeed in building up this corps of valuable workers, conditions are such that it is practically impossible to keep them built up, in other words, to control them unless they are compelled by legal status to register for the specific work they have been qualified to do, or, as the American report states, unless their work is legally and definitely defined.

RECORD 1—Tuesday, January 2, 1923, 10:30 p.m. Call for a nurse, no degree of skill specified; nature of the case, pneumonia; very ill; lives in suburbs. A registered nurse sent.

In the morning, after a hard night, the nurse telephoned to say that the patient was somewhat improved, although still critical, but would we please send an undergraduate or practical nurse, as that was all they could afford and what they had desired in the beginning, to which the office replied that our policy was to leave such a call unfilled, rather than to place those who were not fully qualified for serious cases; she was further advised to request them to try and keep her until the crisis was over, after which period a nurse of the type they desired would be sent; to this they willingly consented, but such well-made plans very soon "gang aft astray." For, presently, one of the Practical type appeared or presented herself, kindly consenting to assume "full responsibility," and the unfortunate factor in the situation was the fact that she

was sent to the case by a reputable nursing organization, the director of whom, when remonstrated with for having recommended a nurse of that type for work that required skill of the highest degree, insolently declared that she had a right to place whom she chose, "that she was a registered nurse who had had public health training and experience," and people had a right to employ whom they chose to nurse their sick. Granted, said we, but have we as trained women any right to lend ourselves to such service; or add risk to life and health in any such manner? And, when one considers that that "practical nurse" had been asked to take the case late at night and refused, (only one of the unpractical attributes of "practical nurse," so called), one is compelled to explain. From such nurses, "Good Lord, deliver us." And I utter that reverently.

One more record; and combined with that the fact that during the past week we have been asked to place "practical" nurses on three different cases of scarlet fever during its acute stage—one of them a woman who was only a week over her confinement, and registering a temperature of 104.

APRIL, 14, 1924—The telephone rings, and a man's voice informs us that it is Dr. S—— speaking. "I had Miss C—— of your staff on a case for me last week; could I have her for one day again this week, for an operation—removal of tonsils?" To which we reply: "We are sorry, Doctor, but we don't place our subsidiary nurses on work of that nature; but can we send you a trained nurse?" From which comes back, in a very imperious tone, "Oh, no; I'll have to get a practical nurse elsewhere."

If it were desirable or necessary, record after record of these calls could be made annually; consequently we feel we are in a position to affirm that compulsory registration of all women employed as nurses is desirable, before we, as the superior officers, or controlling element in a nursing service made up of two distinct groups, will be successful in building up the subsidiary service.

But, on the other hand, once that is obtained and funds in plenty are available, a proper adjustment will quickly follow. Such an adjustment is bound to come slowly, however, as drastic measures without a working knowledge of the situation would only create more chaos. In the meantime it behooves every nurse to look well to the ways of her household, and let no member of our group deceive herself into thinking that the public en masse are going to entirely dispense with the services of any woman who is willing to do her best, even though that best represents a service that does not conform with all the requirements of our profession.

Another important item in our programme: We must realize that registered nurses will have to meet this situation by cheerfully assuming all the nursing work that the secondary type are incapable of undertaking. While the registered nurse who places her name on the private duty list hopes to do nothing but hospital duty or fill calls in homes where there are several maids, etc., she leaves much of the harder types of service for whoever is willing to undertake it, and we cannot claim the right to debar others from assuming such work, but we must make ourselves, if we are to reach a practical solution, responsible for all work. Our failure to do so, together with the fact that without funds we cannot undertake the work in homes where funds are limited, has been the chief incentive for commercial registries. They, meaning the commercial registries, have met and supplied the demand that we as a group created for them. "This ought ye to have done and not to have left the other undone."

A PIONEER IN SUBSIDIARY SERVICE.

A supply of medium-sized labels always accompanies me to a case. Before going off duty, I make sure that every bottle and glass containing a solution of medicinal preparation used for my patient is properly labelled as to its contents and directions for use. This precaution not only lessens the tendency to confuse the orders given the person left in charge, but is also a safety aid against accidents caused by guessing at the contents of an unlabelled bottle.—A.A.G.

The World's Pulse

By ELIZABETH ROBINSON SCOVIL



THE PROGRESS OF CHINA

An Englishman encountering a young Chinaman who was overseeing some work at the Empire Exhibition, London, said, "You catchee muchee fine things for exhibition, eh? Makem one big show for white man?" Young China looked at him gravely and said, "Although your command of English appears to be somewhat limited, I gather that you are pleased with our efforts. Yes, I imagine that the contributions of the Hong-kong community will compare favorably with those of other Empire organizations."

AN INVISIBLE STOP RAY

An English inventor, H. Grindell Matthews, has discovered an invisible destructive electric ray which will instantly bring to a stop anything worked by motor-power. It was demonstrated on a motorcycle. When the lens of the apparatus was concentrated on the machine the engine stopped and the flying-wheel came to a standstill. There was no light, no visible ray, just a low noise like a cat purring. The inventor claims that it will bring down airplanes, explode powder magazines, destroy anything on which it rests and extinguish life. He was paid £25,000 during the war for an invention that controlled motor-boats by wireless.

SIDE SADDLES REQUIRED

At the Paris Horse Show women competitors were forbidden to ride astride; all were compelled to use side saddles.

GERMANS NOT PENNILESS

A German order for 115,000 dozen men's printed handkerchiefs has been placed in Belfast, the largest order received there for many years. Germans are buying luxuries everywhere: art treasures, valuable books and pictures, expensive furs, diamonds and other gems, and many fine fabrics are being sold to them in England. In a time when there is a shortage of salmon, hundreds of cases are being sent from Liverpool to Hamburg, and fresh orders are being constantly received.

EXCAVATIONS AT JERUSALEM

Prof. Stewart McAllister has uncovered a deep trench, sunk in the rock, which seems to have been a part of the defences of the ancient City of David. Above it is a series of broken steps, now cleared of the rubbish and silt that filled them for the first time since before the days of Abraham. He also found a Jebusite sanctuary, which he describes as by far the oldest known holy place in Jerusalem. This is 500 years earlier than anything previously found.

DRUNKENNESS

A French physician, named L'Hospitalier, living in a small town near Tours, claims to have discovered a reliable cure for drunkenness. A small quantity of the patient's blood is withdrawn and inserted subcutaneously into the tissue. For about three days the slightest taste of alcohol nauseates him. The injection can be repeated two or three times, and meanwhile other curative treatment is carried on which completes the cure.

LONG SLEEVES

Paris has declared that long sleeves are to be worn, except with evening dress. Some of them have frills hanging over the hand. All the summer dresses have long sleeves.

WIRELESS INTERRUPTION

By attaching an oscillator to his wireless apparatus, some unknown person has been able to render unintelligible a speech being delivered in Kansas City, by Senator James Reed, an orator of the Democratic party. Radio listeners could hear only a confused jumble of words. The Democratic committee of Kansas City offered a reward of \$500 for information leading to the discovery of the offender.

A MEMORIAL TO LORD KITCHENER

A tablet has been placed on the house in London, No. 2, Carleton Gardens, where Lord Kitchener lived from August, 1914, to March, 1915, while the new army for the Great War was being raised and organized.

THE CANADIAN GUARD

The eleven members of the Canadian Mounted Police who are to guard the Pavilion at the Empire Exhibition are all over six feet tall. They are sent to London by the Canadian Government.

LONG DISTANCE WIRELESS

A programme broadcast from New York was heard at the Hudson Stuck Memorial Hospital, Fort Yukon, Alaska, just north of the Arctic Circle.

HEARTBEATS BROADCAST

A concert at Wanamaker's, New York, was being broadcast, via Schenectady, to Great Britain. A constant clicking sound was heard but could not be identified. It was found afterwards that the station at Pittsburgh had been broadcasting the beats of a man's heart, and this was the sound heard in Great Britain interrupting the concert.

AN AIR AMBULANCE

An air ambulance, a white painted bi-plane with the Red Cross displayed on the fuselage, has been built for the Royal Air Force Medical Service. It has accommodation for two stretcher cases, four sitting cases, a doctor and a nurse.

Public Health Nursing Department



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Address public health news items to the nurse who represents your province on the Publication Committee. Miss M. E. Wilkinson, Ontario Red Cross, 410 Sherbourne Street, Toronto, Convenor.

Nova Scotia—Miss Richardson, 6 Pepperill Street, Halifax, N. S. New Brunswick—Miss H. Meiklejohn, 134 Sydney Street, Health Centre, St. John, N. B. Quebec—Miss Collard, Child Welfare Association, Montreal. Ontario—Miss B. Knox, Provincial Board of Health, Spadina House, Toronto. Manitoba—Miss F. Robertson, 753 Wolseley Avenue, Winnipeg. Saskatchewan—Miss Marion Lindebaugh, Assiniboia, Saskatchewan. Alberta—Miss K. S. Brighty, care of Provincial Department of Health, Edmonton. British Columbia—Miss M. MacLean, 3151 Second Avenue, West, Vancouver, B. C.

Foreward—To enable our readers to become more conversant with public health nursing in other parts of the world, we will endeavor to obtain for this section of the "Canadian Nurse" one article each month regarding this branch of work, as carried on in European and other foreign countries; the first of which appears in this month's issue.

Public Health Nursing in China

Public Health Nursing is in its infancy in China, but the following extract from a letter received from Miss Barton, an American nurse who is doing pioneer work there, in that branch of the profession, shows that progress is being made, slowly, it is true, but nevertheless surely:

"Just a year ago now I started in at this hospital (Hunan-Yale Hospital, Changsha) as a public health nurse, but my first duties were more those of a medical social service worker, the idea being that I should best learn the ways of the hospital, and also the resources of the city by trying to meet each problem as it came up. At the same time I was on a social service committee of the Y.W.C.A., and with them had the privilege of visiting most of the public or rather poor institutions in the city, and in some cases found them willing to take advice. An interesting venture

undertaken by a philanthropic Society of Chinese was the establishment of two large homes for the beggars on the street, as shelters for them during the winter. These have now become permanent homes.

"This same organization has charge of eight houses besides the two beggars' homes, a total of 2,994 people being cared for. In the orphanages we have attempted to cure scabies, an infection which they all seem to have. One of the most important public health measures which we have undertaken has been vaccination against smallpox in many of the schools, by request. We think it is a good sign when they themselves realize the importance of vaccination and the dangers of smallpox.

"Another outside public health undertaking was the physical examination of the children in numerous kindergartens, with an attempt to carry out the doctor's suggestions. It served as a means of obtaining Chinese measurements which have never been standardized.

"At present I have one graduate nurse whose duty it is to care for the women who are doing cross-stitch work for the Yale Mission, the idea being to give back to the workers the surplus earned by them. We first have their eyes examined for glasses and trachoma, then later we will make a greater effort to get the whole family*in if necessary for their various ills, all being paid for by the Cross-Stitch Organization.

"In addition to this one woman nurse we shall very shortly have another, who will start visiting nursing. A Chinese notice sits on my desk now, ready to be sent to the newspaper to-morrow, telling people when, how and where to obtain this nurse. This has been the one thing I have wanted to start ever since I came down here from Peking.

"Of course, along with this work we have demonstrations and lectures, the Council on Health Education furnishing material."

Profession, Patient and Public

By ALLAN CRAIG, M.D., Associate Director, American College of Surgeons, State and Provincial Activities.

In the establishment of the Minimum Standard for hospitals by the American College of Surgeons, the object has been to render a better service to the public as well as to the profession. Our hospitals are built and run for the benefit of the patient. They are not for the convenience of doctors and nurses. In this enlightened day the medical and nursing professions cannot stand behind a veil of scientific mystery, but must take a leading place in the movement for better health, realizing a definite public responsibility and obligation.

The field of nursing, like the practice of medicine, has, within the last few years, become rapidly divided into specialties. More and more

the nurse has been delving into the field of science until the term "nurse" no longer holds its old-time meaning, applying to one who has to do directly with the care of the sick. The public health nurse is in reality an educationalist and an investigator whose duty it is to instruct the individuals under her care in the principles of healthful living. Whether our nurse of the future is to be more of a specialist than she is at present, or whether in the progress of things she will become once more the old-time bed-side nurse with the specialist named according to her respective duties, is not to be discussed here. There is, however, a very definite and fundamental requirement for all who are engaged in the field of nursing or medicine of any form. While the influence and training in the hospital or college has much to do with the after life of the individual, still there are principles of personal character required, and it is these rather than mental attainments or higher education which most often mark the difference between the successful nurse and the failure.

There is in every profession an honorable code of procedure, an underlying ethical standard which must be deep-rooted in every individual member. It is this which provides the profession with its *esprit de corps* and its place in the public regard. One or two high standing individuals in any profession do not establish or make that profession. The basic principles of public regard and confidence lie, in the average of all the individuals, in the profession. Here rests the serious individual responsibility of every nurse. The reputation and standing of the profession is in her hands. She may make or mar it. By thoughtless acts or promiscuous discussions of matters which are only for private or professional consideration the morbid curiosity of the lay mind may be amused or satisfied for the moment, but there comes a reaction later when the onus is placed upon the nurse with criticism not only of the individual, but also of the profession.

How often have doctors or nurses asked themselves the question, "Just what do people in general think of our profession?" Some of us may be prone to disregard public opinion, but do we stop to realize that governments and nations, public institutions and we, ourselves, as a profession, depend largely for our existence upon that same public sentiment and opinion.

The basic principle of the successful nurse must be sound character, professional honesty, and a just pride in her calling. The training school which overlooks these essentials cannot stand for the highest attainments in nursing education. The proof of the school rests in the standing of its graduates.

The nurse or doctor who looks upon the patient simply as a case, or number ten, is lacking in one of the greatest requirements for a successful practitioner of the healing art. Every patient, whether he be rich or poor, high or low, is an individual member of the human race with his problems, his sorrows, joys, and disappointments. As the leaves of the

trees vary, so do the patients under our care show different types of character and mentality. Why does the practitioner of quackery and cultism, absolutely ignorant of the science and art of modern medicine, often have a large following? Because he is an astute student of the mental attitude of his patient. He satisfies the patient. Let us then ask this question in all seriousness, "Is there not a danger that we to-day are giving so much attention to scientific details that we are neglecting humanitarian necessities?"

Few of us seem to realize the fear and dread with which the average patient goes to the operating room or undertakes an anaesthetic. It requires a strenuous personal experience often to develop that individual consideration and discreet sympathy which inspire confidence and are the attributes of a successful doctor or nurse. The study of the individual mental characteristics of the patient should be an essential part of the training of every nurse. Unless she has accomplished this art, she cannot hope for a full measure of success.

Perhaps all this has seemed idealistic. In reality it is truth and necessity. Upon these principles rests the structure of a sound nursing profession with its high ideal of service to the human race. Let us not, in reaching out for more scientific detail, altogether blind ourselves to the realization of the importance of studying the character and individuality of those with whom we come in professional contact. Just as the honor of the nursing profession depends upon the average of its members, so is public opinion based upon the regard of each individual. By a due consideration of our patients, their families and friends, there shall be rendered a more efficient service to the individual and a more abiding place for the nursing profession in the confidence of the public.

Pre-Natal Education in the Home

"Birth is commonly considered as that point at which we begin to live. More truly, it is that point at which we leave off knowing how to live."

PRE-NATAL PROGRAMME

There is no doubt that a consecutive thinking mind could plan an ideal programme—given a subject—but would it not be more practical, as well as more productive of good, to briefly discuss here the failures and successes of pre-natal education among the mothers of a newly-incorporated city of 16,000 population, always bearing in mind an attempt to reach the perfection of this ideal programme? It is strange that this activity (education in pre-natal welfare) is one of the more recent developments in cities where public health organizations are well established. There are various explanations—the old idea of secrecy which seems to surround pregnancy and the mystery of maternity, which is yet an every-day event.

The day is fast coming when the results of pre-natal care will serve as the best possible argument for the great necessity of a thorough education in maternal and child welfare, and of the incalculable importance of scientific supervision of the life of the pregnant mother and due provision for her care at delivery and during the weeks of worry and trial following her labor.

STATISTICS

Given the latest vital statistics of our community as the following: Population, 16,000; births, 550 per year; deaths under 1 year, 36 (due to all causes); premature, 19; stillborn, 24.

ADMISSION TO HOME

This then makes the infant mortality rate a very high one. With the difficulties of a transient population in an industrial city of crowded housing conditions, we find there is a large field in which to labor, and as we hope ultimately to conquer with hard fighting for success. The approach to the home, and securing the interest of the prospective mother, are perhaps the two most difficult problems we have to cope with. One's difficulties are partially solved when each practitioner will tell his patient that a nurse is coming to visit her, to help her in the preparations for the coming of her guest. This has been one of our most pleasant associations in making the work successful. Seventy-five per cent. of the doctors are called upon once a month for a list of pre-natal cases. Invariably several cases of special interest are given to the nurse by telephone during the intervals between calls. In this way we have gotten in touch with 50 per cent. of the birth registrations. But—refer to the other 50 per cent.

How are they brought under the care of the nursing organization? Still more important, how are they brought direct to the care of a physician early in pregnancy? We have obtained a creditable number of cases through friends who know we are intensely interested in this work and have seen splendid results follow our efforts. Again, our child welfare centres are sources of information. The mothers realize the importance of pre-natal care and education. Once having gained their confidence through association with and interest in the toddlers of the family, we are told the secret of the soon-to-be-expected brother or sister. There are suggestions, ways and means of adding to our list of pre-natal cases, which as yet we have not attempted.

WAYS AND MEANS OF ADMISSION

There can be no reasonable exception taken to the keeping of a survey of the registry of marriages; the quiet but persistent endeavor to become acquainted, and then in friendly relationships, with all those women who have assumed the duties of the marital state. Through such acquaintanceships the door of the home is on the latch or easily opened to the visiting nurse, once pregnancy becomes established. In fact, much earlier notification of the desired event and opportunity of educative talks on pre-natal

welfare work being given, is secured. The nurse doing pre-natal work must be always alive to every opportunity of bringing "grist to her mill." It never does to practice the Micawber plan of "waiting for something to turn up." If the prospect is hard to approach, or receives the effort with coldness, it is still possible to stimulate interest and develop knowledge by a judiciously-worded letter suggesting some of the helpful things the public health nurse can offer, or by forwarding literature, such as the "Baby Book," "The Little Mother's Book," etc., to such a woman. A doctor, a girl friend, or a mother may nearly always be found through whom access to the desired one may be obtained. Once having crossed the "threshold," *tact* is the greatest asset and will work wonders. The young wife, especially the primipara, is usually eagerly waiting to be sold knowledge of maternity and care of offspring.

REFERRED BY DOCTORS

If the name of the doctor can be given as the one who referred the nurse to the patient, the entrance to the desired home, or the introduction to the expectant mother, is a simple matter, but we must be most exceedingly careful not to injure the patient's feelings by bluntly opening the subject. It will usually be much better to get acquainted on a friendly basis, such as interest many, or other members of the household.

CO-OPERATION NECESSARY

One may feel that the first visit is useless, or misspent, if the patient is not co-operative. It is, however, much better to err on the side of several apparently wasted one-half hours, rather than to tactlessly and lightly force a conversation which in future may be the cause of "closed doors." The nurse invariably meets many discouraging situations. Strange notions and superstitions must be carefully dealt with. Worries which constantly impair the patient's health are not easily overcome. Pregnant women seem to have a peculiar mental attitude of aloofness and desire to hide, particularly early in pregnancy. We are to allay these feelings and give to the prospective mother a sense of our desire to help and give her confidence and established a desire to follow our suggestions as to care. Twenty-five per cent. of the pre-natal cases are harrassed with worries of home surroundings and conditions. Here the social side is an important subject. The old adage of "harmless as a dove and wise as a serpent" surely applies to social care and investigation. Is it wise to bring in outside agencies in cases such as these? We have found it is not. The nurse and the doctor in attendance, having been given the details of the social conditions, can both relieve the home conditions and ease the patient's mind, making thus far better results than by having a third person introduced to and dealing with a sensitive situation.

PRE-NATAL EDUCATION

Having gained the patient's confidence, there is much "to be talked over." It is better to speak of a few of the essentials during the first call,

but it seems to us unwise to take up all particulars of care, viz., confinement, preparation for the baby in one visit. As we find the mother receptive and willing to follow what is suggested at different times, so we continue to introduce new ideas and add to her education during each call.

SUBJECTS FOR EDUCATION

It is necessary to intimately have information on all the following topics of suggestion: Date of confinement, past history, present condition, specimens of urine, blood pressure, and measurements. In the earlier days the patient is advised to see the doctor at least once a month. Diet, clothing and exercise, preparation for confinement are discussed and arranged for, and patterns, layettes, etc., are talked over and arranged in preparation for the baby. Advice regarding the securing of hospital care (if hospital there is) is given. Literature can be left with the mother upon the first visit.

PRIMIPARA

In doing pre-natal nursing the greatest joy is found in the interest exhibited by the primipara. Education is usually easy with this pre-natal case, which is eager to know all things. Our strongest efforts are directed to inducing her to go to the hospital for her laying-in with her first baby, or, if that is impossible, to secure care in the home, or to have a professional nurse if possible.

PRACTICAL NURSES

It is unfortunate that every community has more than its quota of so-called "practical nurses," and that these women, while well-meaning, though lacking any training in asepsis, themselves become many times the innocent cause of maternal mortality, to say nothing of infant mortality. Concentrated effort has been made to give the mother who must remain at home the very best care available from the unskilled hand. There are many whom we do not employ, nor desire to see employed. The doctor is the one who appreciates our "sorting out" of this type of "maternity nurse." We are considering now the holding of a class for Practical Women, teaching them the rudiments of asepsis, the proper care of a maternity case. This, no doubt, will be ultimately a great benefit to the physician who confines a patient at home. He will learn to know that all arrangements have been previously made for care, and will develop a sense of security in the coming confinement.

MATERNITY SERVICE

We keep a registry of graduate nurses, as well as "practical nurses." It is felt that in time, after a certain number of women have been trained to whom we can then grant employment and service, to the exclusion of others not so trained, we will materially influence, in a benefitting way, the future of the mothers and babies.

PRE-NATAL CLINICS

In large centres of population perhaps pre-natal clinics may better serve some districts, but for our community the individual effort gives the greatest promise of good results. We are working to bring every expectant mother under supervision of a doctor as early as possible. When we have once convinced the mothers themselves so thoroughly of the value of this education, that they urge other women to do the same, we are making rapid progress toward safer motherhood.

EDUCATION FOR ALL CLASSES

There is one point which should be emphasized and that is: pre-natal care should be intelligently sought by and given to the well-to-do as well as to the poor. That there is sufficient monetary possession to cover all medical and nursing attendance is no indication that such attendance is sought. Unfortunately, numbers have not realized apparently the fruitful field of helpful labour which has opened up for them, and still go through child-birth without adequate instructions, or medical and nursing care.

An eminent Scotch doctor has said that just as building of a ship is more wonderful than the launching of it on its first cruise, so the baby's growth and development before birth are more momentous than its entrance into the world.

B. E. HARRIS, R.N.,
Public Health Nurse, Oshawa, Ont.



NEWS ITEMS

ONTARIO

At the annual meeting of the Graduate Nurses' Association of Ontario a Round Table Conference for Public Health Nurses was convened by Miss Edith Fenton, Toronto. The discussion of Health teaching in the homes was introduced by Miss B. E. Harris, Public Health Department, Oshawa, by a paper entitled, "Parental Education in the Home;" this was followed by a paper by Mrs. Bagshaw of the Provincial Board of Health on Infant Hygiene and Pre-school work.

Miss Fenton's paper on Tuberculosis in the Home, which concluded the series, will appear in next month's edition.

MANITOBA

A recent health exhibit which created great interest was arranged by the Public Health Nurses' Department of the Provincial Board of Health. It was placed in the rotunda of the Royal Alexandra Hotel, Winnipeg, in connection with the annual Teachers' Convention.

About four hundred (400) posters of the School Children's Health Poster Competition were displayed. They were judged by Dr. W. A. McIntyre, Supt. of Manitoba Normal Schools, and Mr. H. J. Russell, Technical School, Winnipeg. The Poster Competition was held by the Public Health Nurses' Department of the Provincial Board of Health, to encourage the work of the Health Crusade and particularly to urge the use of health ideas in teaching regular subjects in the curriculum.

Health plays, rhymes, stories, songs and general information were given to teachers at an information desk.

Miss Florence Skinner, graduate of Kamloops Hospital, B. C., was married on April 26th at Winnipeg, to Mr. F. J. Manns, of Gilbert Plains, Manitoba, Mr. and Mrs. Mann will reside in Gilbert Plains.

Miss Margaret M. Morrison, graduate of Brandon General Hospital, was married on April 19th at Toronto to Mr. Charles Lund of Sarnia, Ontario. Mr. and Mrs. Lund will reside at Sarnia.

Miss Skinner and Miss Morrison were formerly members of the Public Health Nursing staff of the Provincial Board of Health.

Progress in post-graduate nursing education in Manitoba is advancing at a sure, though tortoise-like rate.

The first course of instruction of two weeks' duration was given by the Provincial Board of Health Nursing Branch in January, 1918. Each year this department has continued to give an annual course of instruction in conjunction with the annual conference of the staff, until 1921, when the University Extension Department was asked to co-operate in the undertaking. Since then institutes have been held under the auspices of the Manitoba University.

This year the institute was held from April 22 to April 25 at the Science Building, and an attempt was made to meet the needs of Public Health, Private Duty and Hospital nurses. The fee was \$2.00. The success of the institute is shown by the following registration:

Forty-seven Public Health Nurses; 15 Private Duty Nurses; 12 Hospital Nurses; 5 Married Nurses; 32 third year nurse group. Total 111.

- The results prove that, given the opportunity, nurses are willing and anxious to take advantage of post-graduate instruction.

INTERNATIONAL COURSES IN NURSING

The fifth International Course in Public Health Nursing, conducted by the League of Red Cross Societies, will open at Bedford College of Women, University of London, England, on September 1, 1924.

Owing to the fact that many requests for information regarding the best methods for securing advanced instruction for directors and teachers of schools for nurses, have been received by the League, it has been decided to arrange a second International course in London for the purpose of giving special instruction to nurses from different countries who wish especially to include public health nursing in the curricula of schools for nurses.

This second course will be held at the same time as the Public Health Nursing Course, and some of the theoretical part of the two courses, which will be given at Bedford College for Women, will be identical, but additional lectures will be arranged and the practical and observation work of the two courses will be entirely different. The new course will be entitled "The International Course for the Training of Nurse Administrators and Teachers in Schools of Nursing."

Further information in regard to these courses will be furnished by the Canadian Red Cross Society, 410 Sherbourne Street, Toronto.



It is stated that if a burn is covered with tincture of iodine, ten per cent., applied by means of a piece of absorbent cotton soaked in the fluid, it gives complete relief after four or five minutes. Treatment is painful at first, but there are no after ill effects. Only one application is needed.

Private Duty Nursing Department



National Chairman—Miss Edith Gaskell, 397 Huron Street, Toronto.

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Alberta Representative—Miss Agnes Kelly, 457 Twelfth St. N.W., Calgary, Alta.

British Columbia Representative—Miss M. L. McLeay, 1532 Comox Street, Vancouver, B. C.

Graduate Nurses' Association of Ontario

The Private Duty Committee has pleasure in presenting its third annual report.

The year just closed has given a large number of new graduates from the various hospitals throughout the province; very many of them are engaged in private duty nursing, and to all of these we extend a very hearty welcome, and hope that they will take an active interest in matters pertaining to our particular branch of our chosen profession.

The province of Ontario covers an extensive territory, and we feel that it is not easy to get in as close personal touch with the private duty nurses as one would desire, but last summer, for the week of August 13-18, a large number gathered together in the City of Toronto. They had come in answer to an invitation for the purpose of attending a short term extension course in connection with the University of Toronto. At the annual meeting of the G.N.A.O., held at Peterboro, it was decided at our Round Table conference that we should endeavor to organize a refresher course.

This was the first course of its kind ever undertaken by private duty nurses, and it was with some fear and trembling that the Toronto members of the committee set to work to arrange the various details of the course in conjunction with Mr. Dunlop of the University. Mr. Dunlop

was most interested in our plans and gave us every assistance possible, securing for us the best lecturers obtainable in the various subjects in which the nurses desired instruction. To have men who are at the heads of various departments in the University give us one, two or four hours of their time during the week made us realize that our course was no mean one—we were being given the best that the University could provide. The subjects to be discussed were: English literature (4 hours); Psychology (4 hours); Public Speaking (4 hours); Contagious Diseases (2 hours); Diet and Disease (2 hours); Influenza, Sleeping Sickness and Pneumonia (1 hour), and Emergency Surgery (1 hour).

The Private Duty Committee felt that to listen to lectures on the chosen subjects was not altogether what a refresher course was for—the nurses must get into the hospitals and see for themselves new methods and practices carried on in the wards. Many nurses, particularly those from the smaller towns, get little opportunity to go to a hospital after completion of training, consequently it was in their interests that the Superintendents of the University hospitals were approached and asked to co-operate with us in our endeavor to make the course a real success. In each case our request was received with the utmost interest and kindness, and they promised to do whatever we asked them to do.

When the many details of the course had been completed and the last notice sent out to the nurses telling them of our plans and asking them to attend, a few of us wondered what the result would be. We had promised at least twenty, which is the initial number the University required. On the Saturday previous to opening, Mr. Dunlop had about two hundred out-of-town nurses registered for rooms. On Monday morning at 9 o'clock we reported at the Mining Building, where registration took place and the first two lectures were given. The room was too small for all those who sought admission, so we were directed to the Physics Building, a much larger hall, and there we remained for the rest of the week. Instead of 20 we had 340 registered. The gathering of such a number of nurses, the very large majority of whom are actively engaged in private duty nursing, was an eye-opener to the University of Toronto and the medical profession.

Lectures were held each morning from 9 to 12, and it is interesting to report that there were very few latecomers; the vast majority were found wending their way towards the hall soon after 8:30.

On the first afternoon, at the Toronto Western Hospital, the subject discussed was "Diets in the Different types of Nephritis." At the Hospital for Sick Children we were given "Blood Groupings and Transfusion," with an actual demonstration. At St. Michael's Hospital we had been promised something in surgery, and 150 out-of-town nurses were accommodated in the three operating theatres, and 50 in each room witnessed an operation. The other nurses were conducted to the X-Ray Department, laboratory, etc., where doctors and assistants did everything

in their power to show us new developments. At the close of an afternoon that seemed altogether too short, the nurses were entertained at tea by Mother Superior. A fourth afternoon was spent at the Toronto General Hospital, where a practical talk on the "Nursing Care in Diabetes" was given by Miss Rosamond Coutts, the nurse in charge. This was very instructive and interesting, and many of those present realized they had learned something more about diabetes than they could ever get from the newspapers. At the conclusion of the lecture the nurses were shown over the hospital, which was much appreciated.

At the kind invitation of Miss Dickson, Superintendent of Nurses, we visited the Sanitarium and Queen Mary Hospital at Weston. To those who had never been at a T. B. sanitarium before, it was quite a revelation to see such beautiful buildings, so thoroughly equipped. All were much impressed with the little children. Supper and a corn roast on the banks of the Humber made a wonderful ending to a perfect day. On the Saturday afternoon most of the nurses returned to their homes, but about seventy attended a tea party at the Toronto Graduate Nurses' Club, after visiting the Lakeside Home at Centre Island. This ended a week of combined work and pleasure.

It may be interesting to know that representatives were present from practically every alumnae association in Ontario, from Port Arthur to Ottawa inclusive. At least fifteen different American hospitals were represented, three English and one Scotch, also Regina, Vancouver and Montreal. A number of the latter were nurses who were visiting in Toronto on holiday, and who were glad to take advantage of the course. Dr. Beverley Hannah and Prof. Clarence L. Starr each asked the question, "What is the reason of so many nurses coming together in this way during the summer vacation?" Needless to say they were delighted to know that they were keen to learn something which would be of benefit to them in the days to come. This was the spirit which seemed to be in the heart of every one present, and each lecturer felt he had a most attentive audience. As the week wore on the interest did not wane, but rather increased, and many were sorry when the last morning came. The 11 o'clock lecture by Prof. Starr, head of the Department of Surgery of the University, made a splendid ending to an eventful week.

The foregoing is a short report of our one big undertaking during the year. The course was provided for the small sum of \$2.00 a member, and the out-of-town nurses had rooms in the University residences for \$4.00 per week.

As the result of our example, we are pleased to advise that the Michigan State nurses are planning to hold such a course this year, and have already been in touch with Mr. Dunlop of the University of Toronto, who was only too willing to assist them in their endeavor.

We are glad to report that more nurses have applied for accident and health insurance. Since last April 362 have taken out policies. The

amount of claims paid is \$4,019.12. These figures are only approximate; as a number of claims are now pending, waiting adjustment. Altogether, in Ontario, there are 1,200 nurses insured. Nurses in Quebec province have taken the question up, and already a good number have taken out policies.

The Private Duty Section in "The Canadian Nurse" has been provided by the Toronto nurses. We wish the nurses in the other cities and towns would feel it was their duty to collect articles for our magazine. It seems hardly fair that the Toronto nurses should have all the work and all the credit in this respect. I think all will agree that the articles contributed have been interesting and profitable to those engaged in active nursing. We hope to maintain the standard in the months to come.

HELEN CARRUTHERS, Convenor.



THIS DAY

Take thou this day from God, a solemn trust,
Which He commits to thee; and that it may
Be well begun, spend its first hours with Him,
He knoweth all thy needs, and hath arranged
For their supply. Thy pathway, too, this day
Is marked upon His chart in heaven, and was
Before ordained that thou shouldst walk therein.
All through the journey keep thy hand in His,
For He will surely prove thy safest guide,
Since He hath planned each step. And as there come
Fresh opportunities for service, see
Thou use each one for God, giving to Him
Glory in word and deed. So doing all
As in His sight, when this day's course is run,
Thou mayst hand its record unto Him
Without misgiving, rendering Him account
As good and faithful steward. If thou thus
Shall live each day for Him, when sets life's sun,
Thou shalt receive the Master's own "Well done."

"Give me a standing place," said Archimedes, "and I will move the world."

A smile is the whisper of a laugh.—*Child's Definition.*

Pupil Nurses' Department



The Library in the Hospital

Is there anything more terrible than nothing to do? Even to the most egotistical the fascination of introspection soon wears off. For most of us our imaginations need a little spark to kindle them or to revive them. Our worries are poor company; past joys often make us more restless to experience new ones. To the patient lying in bed day after day the pleasantest of thoughts, along with the saddest anxieties, soon present themselves with an unvarying monotony. Not so long ago this was one of the things which made a long illness as trying as any of its physical complications. The library gives practically every patient the opportunity of self-entertainment.

A pleasantly occupied mind reacts on the patient's physical condition. As he reads he forgets his illness, or remembers it only as a determination to get well. For at least several hours a day his mind is diverted from his ailments. If the book is interesting—and it usually is—he forgets his worries, the bills that are mounting up, the possibility of a slow convalescence, the difficulties of getting a new position—any or all of which may be preying on his mind and retarding his recovery.

The organization of the library is simple. The hospital starts with a fairly large library, the size depending on the number of patients. Once a week, volunteer workers bring the books around to the wards in a cart specially made with shelves. The rest of the procedure is much the same as in a public library. The cart is wheeled up to the bedside, the patient chooses his book, has his card marked off, and the book entered up. He may take as many as he feels equal to reading. The old ones are collected, taken back to the main library and there checked off.

The books are all carefully chosen; they are interesting, often thrilling, and thoroughly wholesome. By providing such literature the hospital eliminates to a large extent the entrance of doubtful books and papers. There is not the necessity for friends to bring reading matter to the patient, and by providing books we know they are reading healthy, interesting stories.

It is rather fun to discover your patients' inclinations. The small boy in the end bed has been silent all day. Why? Horatio Alger! Little old Miss Smith seems to have a softer expression; she even smiles to herself. One discovers a copy of "All For Love" under the pillow as the bed is fixed. What! is Mr. Jones ill? He is shaking convulsively and gasping for breath. With your heart in your mouth, you dash up to his bed to be told in excited tones, "How dashed funny he is, that Mr. Lincoln."

Many a patient has blessed the library for relieving the tedium of long monotonous hours. Many a sick person is less petulant and exacting, due to the books that are brought with such regularity. Then there are mothers, too poor to buy the bare necessities of life, who have more than once expressed their joy at finding the child occupied so happily. The library gives more actual comfort and pleasure to the patients than any other benefit.—M. E. B.

Hospital Day in Maple Creek, Saskatchewan

On May 12th the hospital was thrown open for the usual public inspection. The visitors took special interest in the grounds, which are beginning to take on an appearance of Spring, the neatly laid out flower beds, velvety lawn and trimmed hedges all contributing to the attractive appearance of the building. Chief among those who were shown over the premises were High School girls, eager to know something of an institution of vital interest to all, yet about which very little definite knowledge is often known. The operating room, X-Ray room, and splint room were all viewed in turn, though perhaps the class-room with its charts, specimens and blackboards, and the demonstration room with the Chase doll, where the probationers are first initiated into the intricacies of bed-making, received the keenest appreciation. The material for the making of a culture media for bacteria, the incubator where they were germinated, and the microscope under which minute substances may be observed, were regarded with intense interest by all.

Light refreshments in the nurses' dining room, followed by a pleasant hour in the Nurses' Home, completed a day of mutual enjoyment to all who had made the birthday of Florence Nightingale the occasion of active interest in our local hospital.



To make a tight boot easy put it on and lace or button it up. Now stand the feet for a minute or two in a bath containing an inch or less of water, then walk about until they are dry, and repeat if necessary. Of course the thing must not be overdone and the feet allowed to get wet. This plan cures "squeaky" boots. The appearance of the boots is in no way spoiled.

Give what you have; to someone it may be better than you care to think.—LONGFELLOW.

Department of Nursing Education

Conducted by the Canadian Association of Nursing Education



The Annual Convention of the Canadian Association of Nursing Education will be held in Hamilton, Ontario, June 25th to 27th.

A joint session of the C.N.A.T.N. and C.A.N.E. will be held June 23rd at 8 p.m.

PROGRAMME

Wednesday Evening, June 25th—

- 8 p.m. Minutes of last Annual Meeting.
President's Address.
Report of Secretary.
Report of Treasurer.
Correspondence.
Appointment of Committee on Resolutions.
Business arising from Minutes, Reports and Correspondence.
Reports of Standing Committees.
(a) Nominating.
(b) Programme.
(c) Arrangements.
Reports of Special Committees.

Thursday Morning, June 26th—

- 9 a.m. Reports of Special Committees continued.
Discussion on Reports of Special Committees.
12:30 p.m. Adjournment.

Thursday Afternoon, June 26th—

- 2:30 p.m. The Training School and Public Health Nursing.
1. "Every Nurse a Public Health Nurse."
Miss Moag, V.O.N., Montreal.
2. How far does the education given to Nurses in the present day Training School fit them for Public Health Nursing?
Miss E. K. Russell, Toronto.
Miss E. I. Johns, Vancouver.
3. How might our curriculum be changed to meet the needs required?
Miss Jean Gunn, Toronto.
Miss M. F. Shaw, Montreal.
General Discussion.

- 4 p.m. Round Table Discussion on large and small problems in small and large hospitals.
Affiliations—Miss Barrett, Miss Robertson, Miss Winslow.
Group Nursing—Miss Hersey.
Graduate Nurses for Ward Duty—Misses Bennett and Robertson.
Ward Helpers—Misses L. F. McLeod and Pantton.
Shorter Hours—Misses Edy and Kinder.

5:30 p.m. Adjournment.

Thursday Evening, June 26th.

- 8:30 p.m. Changing Conceptions of Education.
Miss I. M. Stewart, A.M., R.N., Professor Nursing Education, Teachers' College, Columbia University.

Friday Morning, June 27th—

- 9 a.m. Unfinished Business.
Elections.
New Business.
Adjournment.

The Teacher in Schools of Nursing

By CLARA F. BROUSE, R.N.

Had this subject been presented even fifteen years ago, there might have been much scepticism expressed by all but the leaders in our most progressive schools, for then the teaching of nurses was considered simply an added obligation of a much-burdened superintendent. To-day, however, the instructor is taken quite as much for granted as is the assistant principal.

There is, of course, much specializing among instructors in large schools, but I shall discuss the instructor from the standpoint of my own experience, which I believe is quite typical of the school connected with a hospital of 150 beds. In such schools one teacher carries the bulk of the class work with, perhaps, the exception of that in nursing procedures, which is taught by the Assistant Principal, who follows up her work with supervision; dietetics is taught by the dietitian; pediatrics during an affiliation; and chemistry and massage by outside teachers. The specialized teacher says such a variety of teaching is impossible. It is, theoretically, but practically it is being done every day. Again, glancing backward at the busy teacher-superintendent of the last generation, and noting the leaders of our profession whom she has taught, I hesitate to criticize.

In her relationship to the hospital administration, the teacher to-day has a recognized place upon the staff of the school of nursing, and is given due consideration by the heads of the various departments. It is only with co-operation of head nurses that there may be any real correlation between the subjects taught in the class-room and the practical nursing of such patients. Here the non-resident teacher may be at some disadvantage, which is only compensated by the keenness of the pupils in reporting cases in class, for they do love to give information to the teacher, do they not?

Any hospital organization, financially able to support a school, will expect a certain expenditure for new teaching equipment each year. I feel that the instructor should appreciate this, and never neglect to ask for a reasonable amount of new material, such as additions to the library, laboratory, or class-room. The administration should recognize, also, that adequate preparation for teaching requires a large investment of time and money, and the financial return to the instructor should show a corresponding increase. Needless to say, each teacher should be granted sufficient time for her own thorough preparation for the day's work and should have pupils in class on time at each scheduled period.

The teacher who is not a supervisor has a peculiar relationship to the students. They approach her with perhaps less awe and more sincerity and confidence. She is a friend, truly interested in their progress and problems, and to her come all the questions the head nurse has had neither time nor the inclination to explain. This teacher must therefore be sympathetic with the changes taking place in the thought and character of the student, as she adjusts herself to this very new environment.

The pupil comes to us so inadequately prepared by her preliminary education. We wonder whether her school work was just studied to be forgotten, for she says the World War was one of the Crusades; that the boiling point is about 120 degrees; she cannot multiply fractions nor solve a proportion. Teaching solutions is a problem for us all, is it not? However, as a redeeming feature, the preliminary student is interested in everything. Her questions cover the entire range of medical knowledge. She is a Freshman in age and manner, a bounder, irrepressible, but an enthusiast, and as such joy as a student. Her second year, a very critical period, finds her quite blasé. She now knows it all, is bored, deigns to ask questions at rare intervals, and makes a futile attempt at acquiring a professional manner. In her last year she shows her true self. She has acquired poise, she sees clearly and kindly, and, if she is a really good student nurse, she shows the humility and consideration for others which can come only after trials have been conquered and the privilege of nursing, as a fine type of service, truly appreciated.

The nurse teacher, as other educators, must keep before her the fundamental five-fold ideals of education of Dr. George Strayer, which include, you remember, a healthy body, an alert intelligence, a develop-

ment of social and moral ideals, a vocation, and training for leisure. This must be the background in presenting any subject which will tend to influence the lives of her students.

In considering the teacher herself, let us look back at the qualities in our teachers which have helped to mould our lives. It is not so much the subject matter taught as the personality of the teacher which has remained. She has helped us to see, and to think, and to appreciate our fellows. So our ideal teacher must be a woman alert and responsive, optimistic and courageous, and above all she must be deeply and truly spiritual if she is to interpret life in its lights and shadows to young students. She must also be an excellent nurse, not only during her period as a student nurse, but with an additional experience of Private Duty well done, head nurse or operating room supervision adequately accomplished, or a period of district nursing. Do we not all recognize the alchemy of the phrase, "I once had a patient," when we are trying to keep up interest in a group of healthy, fatigue-laden pupils?

The nurse-teacher, then, must have personality and fundamental education, for a teacher without high school education is inadequate, and to nursing experience must be added special training—the more the better. This may take the form of one of the various splendid courses offered, particularly adapted to nurses, as the one at Teachers' College, or it may consist of college or normal work nearer home. There are opportunities for advanced study offered in almost any community to-day, at universities, summer school, night school, Y.W.C.A., literary or Civic Clubs, which help materially to keep a teacher alert and interesting. No matter how resourceful we are, none of us can progress very long without coming in contact with other minds which stimulate thought.

A teacher must see to her own recreation and must have will enough to keep out of a rut, by attending social functions, concerts, lectures, theatres and church. She cannot be a good teacher, if she knows nothing but the content of her nursing subjects. Outdoor exercise which gives her real pleasure is excellent for her leisure time. The stress and mental strain of conducting the variety of classes required of the average teacher necessitates a long vacation period; with a change of scene and vegetation, is very good mentally, and grubbing in vegetation is very good physically. So outdoors and sunshine and quiet will rebuild both our minds and bodies.

May I speak a word of warning to over-zealous young nurse-teachers? Do not struggle for a degree; if it comes incidentally as you are acquiring things you really need and will use, of course accept it. Do not sacrifice health, or nerves, or personality, for they are the foundation stones of all truly good work.

In conclusion may I say, a nurse-teacher has but one thing to teach, and that is nursing for health, and if she does not apply each subject directly to this one theme, she will not hold the interest of her students

or give them knowledge they will retain. For, it is only by the practical application of theory that we can expect our pupils to grasp its content. Their energy is much too precious to waste upon mental gymnastics, when the finest type of mind growth can come with the science, skill and idealism which are the basis of all our nursing.

Read at the annual meeting of the Ohio State League of Nursing Education, May 4, 1923.



GREY WOLF

There's a lean grey wolf who comes to my house at night—
Through the bolted door, round the edge of the darkened hall,
Up the silent stairs and through the crack in the wall.
"Is there someone here who lieth awake?" he asks.
"Oh no, Grey Wolf, not here, not here," I cry.
"In some other house, perhaps; not here, not I."
But I tremble the while lest he leap on my pillow yet;
And if I am strong, and call softly enough to Sleep,
She comes, and I hide in her breast from his mutterings deep.
But oft I am weak, and call on dear Sleep in vain;
So he comes, with a snarl and a horrible spring in the night,
And I pray with a prayer that is frenzied for morning light.
For an instant, two instants, or three, the lean grey wolf
Gnaws at my heart for a Blunder he knows is there,
Or a trifling Mistake, or a Sin—and lays it bare.
As it dances before me the grey wolf laughs with delight,
And calls to the Fears, while Sleep, dear Sleep, stands apart,
Though I ache for her arms to be round me, and sore is my heart.
Then I wonder how long it will last, and which is to win;
And I know how they feel who are seized in the night by the Fears,
Who throw them from heights or drown them in deep, dark meres.
When Sleep, hand in hand with Dawn, comes into the room,
The lean grey wolf slips out through the crack in the wall,
And creeps down the silent stairs, round the edge of the hall,
And out through the bolted door and into the street,
Where the milkman, who's rattling his cans and rubbing his eyes,
Cries "Shoo!" to a lean grey cat of ridiculous size.
While I dream of a time when I'll always be strong in the night,
And laugh at Grey Wolf and cry, "Here is a challenge for you:
The horrible things that you tell me have never come true!"

—Nursing Times.



Canadian Army Medical Nursing Service Department

Miss N. C. Macdonald, R.R.C., Matron-in-chief, C.E.F., was in Montreal for a few days recently en route to her home from Ottawa, where she had been visiting friends for several weeks.

The Montreal Association of Overseas Nursing Sisters held their tri-annual meeting in March at the Montreal General Hospital. This meeting was of a purely social nature and was much enjoyed by upwards of sixty Nursing Sisters.

Miss Frances Upton, R.R.C., who has been attending the School for Graduate Nurses, McGill University, is taking charge of the Convalescent Hospital at Murray Bay, Que., for the summer months.

Miss Rae McConnell, R.R.C., has recently received the appointment of Superintendent of the Training School of the General Hospital, Hartford, Conn. Before taking over her new duties she paid a brief visit to Montreal, and while here Miss E. Handcock and Miss L. F. McLeod entertained at tea in her honor.

The marriage took place the latter part of February at Penticton, B. C., of Nursing Sister Carolyn Viets, A.R.R.C., to Mr. Harry Corbett. Mr. and Mrs. Corbett have taken up their residence on Mr. Corbett's ranch at Kelowna, Okanagan Valley.

Nursing Sister G. E. Halpenny, A.R.R.C., received the appointment the beginning of December of Principal Woman Officer, Department of Immigration and Colonization, at the Canadian Government Emigration Office at Southampton, England. Miss Halpenny arrived in England to take up her duties the early part of January, 1924.

Mrs. N. E. Williams (Nursing Sister Beatrice Blewett, A.R.R.C.), sailed for Canada early in January to spend several months with her family.

Nursing Sister Conroy is now Matron of the Home for the Feeble-minded at Red Deer, Alberta, run by the Department of Public Health of the Province.

Nursing Sister Redmond (now Mrs. O'Brien) is residing at Berwyn, Alberta, which is head of steel for that part of the country.

Nursing Sister A. M. Wilkin is still in Edmonton with the Department of Public Health.

Hospitals and Nurses



NOVA SCOTIA

The third quarterly meeting of the Executive Committee of the G. N. A. of Nova Scotia took place at the Board of Trade rooms, April 10th and 12th. An out-of-town visitor was Miss Olive Robson, of Sydney, representing Cape Breton County Local Branch.

The annual meeting is to take place on July 16th, in Amherst. This will be the second assembling of the Association outside of Halifax since the summer of 1916, when the place chosen was Truro.

The Medical Society meets this year at the same time in Amherst.

Miss Frances Fraser, of the Massachusetts-Halifax Health Commission, has returned to duty greatly benefited by her two months' treatment at the Royal Victoria Hospital, Montreal. The remaining month of her convalescence was pleasantly spent in visiting her sister in Montreal.

Miss Alice Johnston, formerly of the C.A.M.C., Dalhousie Unit, has returned to her home in Dartmouth, after having spent five years as Superintendent of the King Edward Memorial Hospital in Bermuda.

Miss Gertrude MacKenzie, Pictou County Public Health Nurse, has returned from two months' leave. Miss Elizabeth Browne relieved during Miss MacKenzie's absence.

Four of the Eastern Counties have formed a local branch, Antigonish, Guysborough, Richmond and Inverness. The membership is small, but from the personnel, active and interested, much is anticipated.

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QUEBEC

MONTREAL GENERAL HOSPITAL

Delegates to the National Nurses' Association convention, to be held in Hamilton, Ont., last week of June, are: Miss Christena Watling, Quebec Provincial Association; Miss Agnes Jamieson, Montreal Graduate Nurses' Association, and Miss Edith Cowen, Montreal General Hospital Alumnae Association.

Mrs. J. A. Henderson, Roslyn Ave., Montreal, District Superintendent of St. John Ambulance Brigade Overseas, is sailing for London, England, on May 11th, 1924, by the *Melita*, to attend the conference of all the Dominion overseas.

Miss Rachel McConnell, who has been on the staff of the Hartford Hospital, Hartford, Conn., has been promoted, to Lady Superintendent.

Miss K. H. Brock has gone to spend the summer in England.

Miss Agnes Bullock has been on an extended trip to Eastern States.

Mrs. Burwell (Lottie Fraser) is now resident in Port Huron, Mich.

Miss Lillian Tracey is spending the summer in Europe, in company with a patient.

Miss Welling (class '23) has been for some months in charge of Ward B, in Montreal General Hospital.

Miss Sarah Dawson is in charge of the Home for Incurables, in connection with the Morris Home.

Miss Marion Elliott is sailing for Europe on June 21st on the *SS. Regina*, under the direction of Dr. Hubbell's College Tour.

Mrs. John Adair announces the engagement of her daughter, Lillian Maud, to Dr. Charles C. Stewart, son of Mr. Duncan Stewart, of Perth, Scotland. The marriage to take place in the near future.

Miss Vivian Tremaine, former nurse to the King, visited her home in Montreal lately on her way to Quebec. Miss Tremaine has been in charge of the Red Cross Nursery, at the Immigration Building, St. John, W., N. B., for some time.

At the April monthly meeting of M.G.H. A.A, Dr. Harywood, Superintendent of M.G.H., gave a very interesting address concerning the institution of which he has charge, also at the May meeting nurses enjoyed a splendid address on social diseases, by Dr. F. S. Patch.

Miss F. M. Shaw was appointed to represent the Province of Quebec at the meeting of the American Nurses' Association, to be held in June at Detroit, Mich.

MONTREAL-ROYAL VICTORIA HOSPITAL

Miss Ella Moffatt (R.V.H., 1919), is doing private nursing in Chicago, Ill.

Miss Frances Fraser (R.V.H., 1923), has been appointed resident nurse at Miss Beard's School, Orange, New Jersey.

Miss Marion Dart, and Miss Elizabeth Cameron (R.V.H., 1923), are doing floor duty at the Hospital, at Nassau, New Jersey.

Miss Annie Lockhart (R.V.H., 1923), is resident anaesthetist at the Hospital at Newark, New Jersey.

Miss Eveyln Filmer (R.V.H., 1923), has been appointed Instructor at the Galt Hospital, Lethbridge, Alta.

Miss Pauline Ward (R.V.H., 1923), is Assistant Head Nurse on the second floor of the Ross Pavilion.

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ONTARIO

TORONTO WESTERN HOSPITAL

We are sorry to announce that Miss Flora Keith (class 1921) has been seriously ill at the Western Hospital for some time.

Miss Agnew (class 1921), who has been Supervisor of the Obstetrical Department for the past year, is taking a six months' post-graduate course in this subject at the Chicago Lying-In Hospital.

Miss Fanny May (class 1923) is relieving her here for this short length of time.

We are sorry to announce that Miss Cooper, President of the Alumnae, had the misfortune to break her arm and has been laid up for the past three months. Miss Laura MacDougall is filling her position temporarily at Massey-Harris Co.

Mrs. Leta Hard, who has been nursing in Miami, Florida, for the winter, has taken her patient to Europe.

GODERICH

A very successful sale of home-made cooking was held by the Alumnae Association of The Alexandra Marine and General Hospital, Goderich, on Saturday, February 16th, the proceeds of which is to be the nucleus of a fund to furnish and support an Alumnae room in the new Hospital, which, it is hoped, will be opened by Autumn.

HAMILTON GENERAL HOSPITAL

The Graduating Exercises of the Hamilton General Hospital were held at the Hospital on Wednesday, May 7th.

Miss E. McPherson Dixon, Superintendent of Training Schools for the Province of Ontario, administered the Florence Nightingale pledge to thirty graduating nurses.

The Hon. Forbes Godfrey, Minister of Health for Ontario, was the speaker of the afternoon. The Emma E. Pratt prize (\$100 in gold) was presented to Mary E. Castle; the Mary McClaren House prize (\$50 in gold) to Margaret Logie; Dr. D. McIlwraith presented his prize for Obstetrics (\$25) to Helen Robinson; and the University Scholarships, given by the Board of Governors, were presented as follows: Public Health, to Kathleen Merrett; Administration (1st) to Anne Powell, and (2nd) to Marjorie Johnson.

Miss Fish has resigned from the General Hospital staff to accept a position at Mount Sinai Hospital, Cleveland.

The Misses Baird, Blough and Manson have accepted positions in New York.

Miss Muriel Carter has resigned from the H. G. H. operating room staff. Miss Grace Powell has been appointed in her place.

Miss Nellie Wright has accepted a position with the Henry Ford Hospital, Detroit.

ST. JOSEPH'S HOSPITAL, LONDON

The annual banquet of the St. Joseph's Hospital Alumnae, London, Ont., was held on April 23rd, in Wong's Cafe. The twenty nurses who composed the 1924 Graduating Class were guests of honor at this affair. A number of former graduates were present for the occasion and a very happy evening was spent.

Mrs. W. C. Tighe was the representative of the St. Joseph's Hospital Alumnae Association, London, who attended the Convention of the G.N.O.A., which was held in Windsor, April 24th and 25th. She was appointed to the Board of Directors of the G.N.A.O.

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MANITOBA

BRANDON

The Brandon Association of Graduate Nurses held their annual dinner on March 29th at the Prince Edward Hotel. About 40 nurses attended. The guest of honor was Miss Birtles, Hon. President of the Association, and for over twenty years Superintendent of the Brandon General Hospital. As Miss Birtles is leaving for a long visit to England, this dinner was made the occasion for wishing her "bon voyage," and also of presenting her with a camera and box of films. Mrs. Pierce, the retiring President, was presented with a lovely bouquet of pink roses. At the conclusion of the evening the business of the annual meeting was settled. Very satisfactory reports were read from all officers of the 1923 executive. It was decided that the Association, having financed the training of one Chinese male nurse who has just completed his third year of training, shall now devote its energies to raising a fund to be used in the interests of the "blind people" of Brandon. During the past year several social evenings and outings have been arranged for the blind, and the Association, having undertaken this work, now intends to do work of a very practical nature toward helping these people.

In reply to a letter received from the Brandon Medical Association asking the private duty nurses to consider the proposal of a 14-hour duty, when on duty, it was resolved that a letter be sent to the Medical Association stating that the private duty nurses intend to adhere to the 12-hour schedule, which has always been observed at the Brandon General Hospital for special nurses.

Pink and white carnations, which decorated the table, were sent to two sick friends of the Association.

WINNIPEG

The nurses at the Graduate Nurses' Residence, 753 Wolseley Avenue, Winnipeg, held a St. Patrick's tea in aid of the Manitoba Nurses' Endowed Bed Fund, which realized the goodly sum of \$170.

Miss Bessie Wilson (W. G. H., class 1922), who spent the winter in California, has returned and is doing private duty nursing in the city.

Miss Sara Millidge (W. G. H., class 1924), has accepted a position on the staff of the King George Hospital.

Miss Alice Dolan (St. B. H., class 1920), has been appointed assistant supervisor of the operating room, Jewish Hospital, Brooklyn, N.Y.

Miss J. Burnett (W. G. H., class 1919), has accepted the position of night supervisor at the Dauphin General Hospital.

Miss Margaret Harper (St. B. H., class 1908), of the Bureau of Child Hygiene, has returned from Long Beach, Calif., where she spent the winter.

Miss Elsie Wilson and Miss M. Wilkins have been appointed delegates from the Manitoba Association of Graduate Nurses to the bi-annual meeting of the C.N.A.T.N. to be held at Hamilton, Ont.

Sympathy is extended to Miss Florence Robertson, of the Winnipeg School Nursing Staff, in her recent bereavement. Miss Robertson's mother died at Peterboro, Ont.

Miss Edith Taylor (W. G. H., class 1898) has accepted a position in the Surgical Department of the T. Eaton Co.

Miss J. Menzies (C. H., class 1923) has accepted a position on the staff of the Royal Jubilee Hospital, Kenora, Ont.

Miss B. Thomas has accepted the position of superintendent of the Melfort General Hospital, Saskatchewan.

Miss Edna Lowry (C. H., class 1922) has accepted a position on the staff of the Bureau of Child Hygiene.

Miss C. Thom (W. G. H., class 1909) has been appointed to the city staff of the Bureau of Child Hygiene.

Miss Olive Patrick (W. G. H., class 1920) is doing public health work in Regina, Saskatchewan.

Miss Margaret McCrae (W. G. H., class 1911) and Miss Ruth Hicks (W. G. H., class 1911) have returned from California, where they spent the winter.

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BRITISH COLUMBIA

The twelfth annual meeting of the Graduate Nurses' Association of British Columbia was held on April 21st and 22nd, in the Nurses' Home, Royal Jubilee Hospital, Victoria, B. C., the President, Miss E. Breeze, of Vancouver, presiding.

The morning of April 21st was given over to meetings of the three standing committees, namely, Public Health, Private Duty and Education. Private Duty and Education Reports were received and plans made for work for the coming year.

At 2:30 p.m. the first general session was held. The invocation was delivered by Rev. G. H. Andrews, followed by addresses of welcome by His Worship Mayor Hayward of Victoria, and Miss M. E. Morrison, President of the Victoria Graduate Nurses' Association. Miss Kate Scott, R.N., Superintendent of Nurses, Royal Columbian Hospital, New Westminster, responded.

Miss Breeze delivered an address relating to the various activities of the Association during the past year. The outstanding feature of the year's work was the holding of Institutes in connection with the summer school at the University of British Columbia, including six weeks' administrative and teaching courses and three days' private duty refresher course. Announcement was made of the four days' Institute for Public Health Nurses to be given with the co-operation of the University of B. C., April 23rd to 26th.

The Treasurer's and Registrar's reports, submitted by Miss Randal, were read by Miss McLellan, as Miss Randal was unable to be present, owing to illness. The Treasurer's report showed a balance of \$8,004.92. The report of the Registrar was very gratifying. It showed to the satisfaction of this Association that we are considered throughout Canada to have the best organized system of nursing activities. We are being consulted through the Registrar as to affiliation, inspection of training schools, local registry systems, the methods of R. N. examinations, and it should be an incentive to do more. The report also stated that 257 nurses had been registered during the past year.

Mrs. M. E. Johnston gave the Secretary's report, reviewing the work accomplished during the year.

Miss Randal's report on training school inspection was exceptionally interesting. She spoke of the visits to training schools, and of the standard of preliminary education of two successful years in high schools, necessary as the minimum requirement for nurses entering training schools. The need for properly qualified nurses to take charge of small training schools was emphasized, and the suggestion made that the larger hospitals should watch for nurses with ability for such work and give them special instruction and opportunity for advancing in this branch. It was suggested that such teaching should be made a post-graduate course. A proposition that all applications for training schools be centralized and the pupil placed where most needed, was submitted.

Report on the National Memorial was given by Miss Breeze. The G. N. A. of B. C. has subscribed \$4,836 towards the memorial; the total amount received for the Dominion amounts to \$37,544.97. It is not expected that the Memorial will be unveiled until 1926. Reports were received from various committees, giving details of the year's work.

Resolutions to be dealt with at the annual meeting of the Canadian National Association of Trained Nurses, at the meeting to be held in Hamilton, Ontario, June 23rd to 25th, were discussed. Three delegates were appointed to attend the meeting, Miss Breeze, President, G. N. A. of B. C.; Miss McLeay, Convenor of Private Duty Committee, and Miss Johns, Convenor of Educational Committee.

At the evening session an address was given by Rev. Clem Davies on "What is Divine Healing?" Solos were rendered by Mrs. Jamieson and a duet by Miss Clothier and Miss Purdy.

The programme for the morning session, April 27th, was arranged by the Public Health Committee. "A Health Centre in the Year 2000" formed the subject of an interesting and amusing paper by Miss Bessie Robison, of the Child Hygiene Department of Vancouver.

A paper on "Co-operation," by Miss Elinor Wade, Provincial School Nurse, Fernie, B. C., gave apt illustration of the best ways of securing co-operation, and the necessity for it in the various phases of Public Health work.

An interesting paper on "Reminiscences," by Miss C. R. Whillans, of Victoria, was read by Miss O'Connell, followed by a paper by Miss Ferneau on "Insulin Treatment of Diabetes."

The evening meeting, which was the final session, was addressed by Dr. Gordon Kenning, who spoke on "Some Phases of Disease Prevention." Dr. Kenning emphasized the importance and the responsibility of the doctor and nurse in spreading the gospel of disease prevention.

Miss Schaeffer, Dietitian, Royal Jubilee Hospital, gave a fine outline of the dietitian's work, dealing with the question of what had been accomplished in demonstrating the value of certain foods and the relation to growth and to resistive powers in disease.

Votes of thanks to the various organizations which had lent themselves to the entertainment of the delegates, and the speakers at the various meetings, brought the Convention to a close.

On every hand were heard expressions of regret at the absence, due to illness, of Miss Randal, the Treasurer and Registrar. Miss Randal is one of the charter members of the Association and this was the first time since the forming of the Association that she has missed a meeting, either executive or general.

Victoria people are famous for their hospitality, and various social functions added to the pleasure of the Convention. Following the meeting on Monday evening, the Association were the guests of Jubilee Alumnae Association. On Tuesday afternoon an enjoyable motor drive was arranged, afterwards the nurses being entertained at tea by the Alumnae Association of St. Joseph's Hospital and conducted over the hospital by the Sisters.

On Tuesday evening the Convention members were the guests of the Private Duty Section of the Victoria Graduate Nurses' Association.

The Executive Council were entertained at dinner Monday evening at the Royal Jubilee Hospital by Miss Jessie F. MacKenzie, Superintendent of Nurses, Royal Jubilee Hospital, and the Executive of the Victoria Nurses' Club.

The next annual meeting of the Association will take place in New Westminster.

HAZELTON

Hospital Day was observed at the Hazelton Hospital by a reception and tea at the Hospital by the Hospital Staff, Ladies' Auxiliary and Hospital Board, and a Baby Show open to all babies born in the hospital. In the evening the graduation exercises of the 1924 class took place, with an informal dance at the close of the programme.

VANCOUVER

The following nurses have completed their five-year course at the University of British Columbia and obtained their degree: Miss B. Pearce, Miss E. Naden, Miss C. L. Cook, Miss E. Wilson and Miss B. Gill.

The V.G.N.A. held their monthly meeting at the Lecture room of the Vancouver General Hospital, Wednesday, May 7th. A most entertaining and delightful talk was given by Prof. Davidson on "The Wild Flowers of B.C." After the lecture, refreshments were served in the new Nurses' Home, which brought to a close a very pleasant evening.

VANCOUVER GENERAL HOSPITAL

The Vancouver General Hospital Alumnae Association is very grateful to those who have shown their interest in our nurses' sick benefit fund, and have assisted us in advancing toward our objective, either by cash donation or by making it possible for us to raise money ourselves.

The Association wishes to express its appreciation to Mrs. Ernest Rogers for a cash donation of \$100.

On April 25th a recital was given by Mrs. Douglas Johnston, presenting Miss Margaret McKecknie, pianist, assisted by Miss Winnifred Bell, vocal soloist, the proceeds being very kindly donated by Mrs. Johnston to the sick benefit fund.

An afternoon of bridge and mah jongg, given in the home of Mrs. Stanley Creelman, Belmont Ave., on April 29th, was very successful and advanced the fund by more than fifty dollars. General Convenor for the bridge tea was Mrs. J. Rose.

On May 16th the Alumnae gave a dance in Willow Hall in honor of the 1924 graduating class.

BIRTHS

Allan—At the Laurentian Hospital, Grand'Merre, P.Q., on April 15th, 1924, to Mr. and Mrs. A. Oswald Allan (Miss Kathleen Smith, Montreal General Hospital, 1919), a daughter.

Fraser—To Mr. and Mrs. Kenneth Fraser (Miss Hannah McLennan, Montreal General Hospital, 1914), a son, at Sidney, Cape Breton.

Hood—To Dr. and Mrs. J. H. Hood (Miss Shortreed), of Toronto, on May 6th, 1924; a son.

MacNeilly—Mr. and Mrs. MacNeilly (Marjorie Eaton, Montreal General Hospital, 1918), at the Montreal Maternity, in first week of June, a son.

Roberts—At Wellesley Hospital, to Mr. and Mrs. Fred Rogers, (Florrie Stewart, Wellesley Hospital, 1919), on March 9th, 1924, a son.

Stockhouse—To Dr. and Mrs. H. R. Stockhouse (Miss Joyce, 1914, Ridgeway, Ont.), a daughter, on Monday, April 21st, 1924.

MARRIAGES

Bridgeman-Mullins—At St. Peter's Cathedral, London, Ont., on April 30th, 1924, Miss Dorothy Mullins (St. Joseph's Hospital, 1922) was married to Mr. Jack Bridgeman, of St. Thomas, Ont. They will reside in Windsor.

Carr-Pincock—On Sept. 29th, 1923, in Manitoba, Miss Nellie Pincock (class 1919, Montreal General Hospital), to Mr. Carr.

Cocks-Phillips—At St. Stephen's Church, Edmonton, at high noon, Monday, April 21st, 1924, by Rev. F. C. Cornish, Lucy Frances E. Phillips (Yorkton, Sask., '13), was united in marriage to Albert Victor Cocks, of Gleichen. Mr. and Mrs. Cocks will reside in Gleichen.

Gardner-Benger—At Cornwall, Ont., on May 10th, 1924, Mary E. Gardner (R.V.H., 1919), to Mr. William Frederick Alexander Benger.

Hood-Richardson—At the pro-Cathedral, Calgary, Alta., on July 28th, 1923, Zella Richardson, R.N., P.H.N., to Francis Hood, of Kent, England. Address, "Fox Lake," Bonnyville, Alta.

James-Pollard—At Montreal, on April 30th, 1924, Ruth Mildred James (R.V.H., 1919), to Mr. Reginald Flint Pollard.

Jamieson-Callin—At San Francisco, on Monday, April 21st, Josephine Catherine Callin (Winnipeg General, '23), to Mr. John Benjamin Jamieson. Mr. and Mrs. Jamieson will be at home after May 1st at Macher, Calif., Toulunne.

Taylor-Walper—At the Manse, Grand Bend, Ont., on April 12th, 1924, by Rev. A. M. Grant, B.A., B.D., Edna A. Walper (Sarnia General Hospital, class '13), to Mr. Lloyd Taylor, of Grand Bend, Ont.

White-MacTier—On Tuesday, April 29th, 1924, at St. George's Church, Montreal, by Venerable Archdeacon Paterson Smyth, Adeline Waddell, daughter of Mr. and Mrs. A. D. MacTier, of Montreal, to Donald Alexander White, D.S.O., son of the late Lt.-Col. Frederick White, C.M.G., and Mrs. White, of Ottawa. Mrs. D. A. White is a graduate of Montreal General Hospital.

INSOMNIA

Like most other nurses in my training school days, I was taught various methods of managing patients with insomnia—warm baths, no tea or coffee for the evening meal, no exciting reading nor news, gentle rubbing, etc. All these are good things in some cases, but all have failed me when a serious prolonged case of insomnia had to be dealt with. It took me many a year to learn that unless one can be helped to control one's thinking, the procuring of sleep is a difficult problem, or to grasp the idea that *fear* is at the bottom of the trouble. Grown-ups, after losing one night's sleep, worry over the next. They go to bed fearing that they will not sleep, and count the hours of the clock as they lie awake. Dubois's book, "The Psychic Treatment of Nervous Disorders," gave me the first real instruction I ever had on the subject of how to get rid of the *fear* that causes the insomnia. I believe that every nurse would find it helpful, whatever her line of nursing may be. Unless patients can be taught to put their worries aside at bedtime, all the hot milk and warm baths and massage, etc., we can give them will prove ineffectual in cases of prolonged insomnia.—C. P. Hawthorne, in *The Trained Nurse and Hospital Review*.



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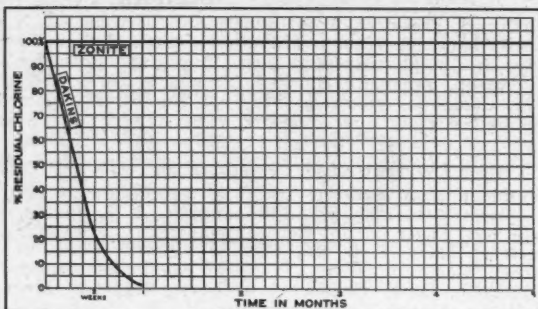
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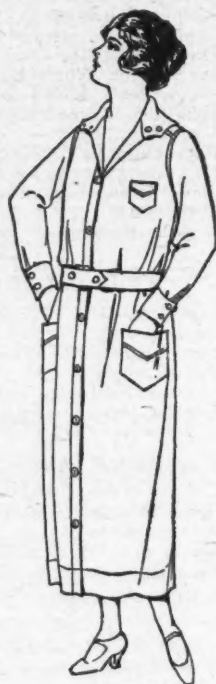
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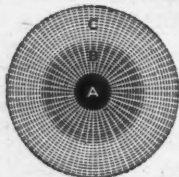


Diagram represents inflamed area. In zone "C" blood is flowing freely through underlying vessels. This forms a current away from the Antiphlogistine, whose liquid contents, therefore, follow the line of least resistance and enter the circulation through the physical process of endosmosis. In zone "A" there is stasis, no current tending to overcome Antiphlogistine's hygroscopic property. The line of least resistance for the liquid exudate is therefore, in the direction of the Antiphlogistine. In obedience to the same law exosmosis is going on in this zone, and the excess of moisture is thus accounted for.



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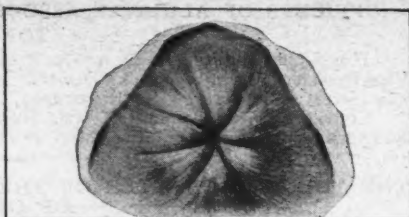
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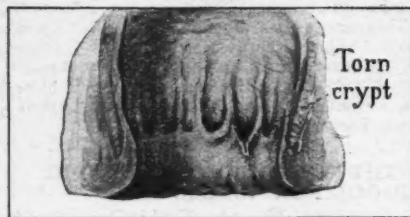
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Correspondent to "Canadian Nurse"—Miss Ethel M. Eby, 50 King St., Guelph, Ont.

THE ALUMNAE ASSOCIATION OF THE ROYAL ALEXANDRA HOSPITAL, FERGUS, ONTARIO.

Hon. President, Mrs. Little; President, Miss Ella Hawkins, R. N., 15 Pauline Ave., Toronto; Vice-President, Mrs. Davidson, R. N.; Recording Secretary, Miss Ida Young, R. N.; Corresponding Secretary, Miss Evelyn Osborne, R. N., 1725 Dufferin St., Toronto; Treasurer, Miss Bertha Brittinger, R. N., 1725 Dufferin St., Toronto; Press Representative, Miss Jean Campbell, R. N., 72 Hendricks Ave., Toronto, Ont.

THE KITCHENER AND WATERLOO GRADUATE NURSES' ASSOCIATION.

President, Miss Winterhalt; First Vice-President, Miss Carter; Second Vice-President, Miss Orr; Secretary, Miss Elsie Masters, 13 Chapel Street, Kitchener; Treasurer, Mrs. Wm. Knell, 126 Breithaupt Street, Kitchener.

"Canadian Nurse" Representative—Miss L. McTague, K. & W. Hospital, Kitchener, Ont.

KITCHENER AND WATERLOO GENERAL HOSPITAL ALUMNAE ASSOCIATION

President, Mrs. H. M. Lockner; Vice-President, Miss Marre Wunder; Secretary, Miss George DeBus; Treasurer, Miss Maude Carter, 5 Holm Apartments, Kitchener, Ont.

Representative to "Canadian Nurse"—Miss Ada L. Weseloh.

Regular Meetings—Second Thursday of each Month.

THE ALUMNAE ASSOCIATION OF ST. JOSEPH'S HOSPITAL, HAMILTON

President, Miss E. Moran, Holden Apartments, Barton Street, East; Vice-President, Miss Kelly, 250 Hughson Street, North; Recording Secretary, Miss Carrol, 774 King Street, East; Treasurer, Miss Campbell, 33 Bay Street, South.

Representative to "Canadian Nurse"—Miss Fagan, 49 Spadina Avenue.

Representatives to Local Council of Women—Miss Nally, 213 Cannon Street, East; Miss Egan, Alexander Apartments, King Street, East.

Sick Committee—Miss Brunning, 168 Walnut Street; Miss Weishar, 55 Catharine Street, South.

Representative to Central Registrar—Miss Murray, 21 Gladstone Avenue.

Executive Committee—Miss Boyes, 17 East Avenue, South; Miss Grant, Alexander Apartments, King Street, East; Miss Blatz, 179 Charlton Avenue, East; Miss Cartmell, 179 Charlton Avenue, East; Miss Himmen, 168 Walnut Street, South.

Corresponding Secretary—Miss Bedford, 2 Holden Apartments, Barton Street, East.

Private Duty Nurse Representative—Miss Murray, 21 Gladstone Avenue.

HAMILTON CHAPTER OF THE GRADUATE NURSES' ASSOCIATION OF ONTARIO

Chairman, Miss H. McDonald, 38 Herkimer; Vice-President, Miss G. Fairley, General Hospital; Secretary, Miss B. Aitken, 549 Main St., E.; Treasurer, Miss Crane, 24 Rutherford.

Executive Committee—Miss Carrol, 774 King, E.; Miss Aldred, 99 West Ave.; Miss Shepherd, 71 Wellington, S.

Representatives to Local Council of Women—Miss Moran, 405 King, E.; Miss Sadler, 100 Grant Ave.

ALUMNAE ASSOCIATION OF THE OWEN SOUND GENERAL AND MARINE HOSPITAL

Honorary President, Miss J. K. McArthur; President, Miss Sein, 860 Third Avenue, E., Owen Sound, Ont.; 1st Vice-President, Miss Lynn; 2nd Vice-President, Miss O. Stewart; Secretary-Treasurer, Miss Edna Johnson, G. & M. Hospital, Owen Sound.

Sick Visiting Committee—Miss Rusk (Convenor), Mrs. F. Garrett, Mrs. D. McMillan.

Private Duty Committee—Miss A. Sitzler, 531 Third Avenue, Owen Sound.

Programme Committee—Miss O. Stewart (Convenor), Miss I. Forhan, Miss E. Webster.

Press Representative—Miss D. Findlay.

THE ALUMNAE ASSOCIATION OF THE HAMILTON GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES

Honorary President, Miss Grace Fairley, Hamilton General Hospital; President, Miss Minnie Pegg, 80 Grant Avenue; Vice-President, Miss Isabelle McIntosh, 353 Bay Street, South; Secretary, Miss Nora McPherson, Hamilton General Hospital; Treasurer, Miss Fish, Hamilton General Hospital; Corresponding Secretary, Miss Godden, Hamilton General Hospital.

"Canadian Nurse" Correspondent—Miss R. Burnett, 33 Spadina Avenue.

Executive Committee—Miss Mary Kennedy, 597½ King Street, East; Miss C. Waller, 597½ King Street, East; Miss A. Kerr, 83 Grant Avenue; Miss C. Kerr, 83 Grant Avenue; Miss Blanche Binkley, 30 Ontario Avenue.

Representatives to National Council of Women—Miss E. Taylor, 35 West Avenue, South; Miss Burnett, Miss B. Aitken.

Representatives to Central Registry—Miss A. Kerr, Miss Binkley, Miss Waller, and Miss Elsie Maine.

Sick Committee—Miss A. P. Kerr, Miss M. E. Dunlop, Miss R. Burnett, Miss Ainslie, and Miss Kate Peart.

ALUMNAE ASSOCIATION OF THE BRANTFORD GENERAL HOSPITAL

Honorary President, Miss M. Forde, Superintendent Brantford General Hospital; President, Miss Hope Dieringer, 67 Sheridan Street; Vice-President, Miss W. D. Wiley, 164 Park Avenue; Secretary, Miss J. E. Martin, 154 Rawdon Street; Assistant Secretary, Miss E. McKay, 121 Market Street; Treasurer, Miss F. Westbrook, 367 Park Avenue.

Gift Committee—Misses S. Livett and C. McMasters.

Social Convenor—Mrs. Caton, 124 Rawdon Street.

Flower Committee—Misses C. Kelly and McKee.

Press Representative—Miss A. Hough.

"Canadian Nurse" Representative—Miss C. B. Good, R.R. No. 4, Paris, Ont.

Meetings held at the Nurses' Residence, first Tuesday.

ALUMNAE ASSOCIATION OF THE MACK TRAINING SCHOOL, GENERAL AND MARINE HOSPITAL, ST. CATHARINES, ONT.

Honorary President, Miss L. Uren, C. and M. Hospital, St. Catharines; President, Mrs. Parnell, 124 Lake Street, St. Catharines, Ont.; Vice-President, Miss Marriott, Berryman Avenue; Secretary, Miss E. Rawlings, G. and M. Hospital; Treasurer, Mrs. W. Durham, R.R. No. 4; Auditors, Miss A. Calvin and Miss F. L. Cowley.

"Canadian Nurse" Magazine Representative—Miss E. M. Armbrust.

Programme Committee—Misses A. Moyer, M. Stevens, F. Cowley, A. Calvin, B. Kennedy, and Mrs. Leo Brett.

Regular Meeting—Last Tuesday, 2.30 p.m.

THE ALUMNAE ASSOCIATION OF THE AMASA WOOD HOSPITAL TRAINING SCHOOL FOR NURSES, ST. THOMAS, ONTARIO

Hon. President, Miss L. Weldon; Hon. Vice-President, Miss L. Armstrong; President, Miss L. Crane; Vice-President, Miss Y. Birt; Secretary, Miss L. Parker; Treasurer, Mrs. R. W. Stevenson.

Executive Committee—Misses Vollett, Bennett, Bell, Grant and Coulthard.

Representative to "Canadian Nurse"—Miss H. Hastings.

SARNIA GENERAL HOSPITAL ALUMNAE ASSOCIATION

Hon. President, Miss K. Scott, Superintendent S.G.H.; President, Miss M. Lee; Secretary, Mrs. H. Shanks, London Road, Sarnia; Treasurer, Miss Noble; Correspondent for "Canadian Nurse," Miss J. B. Taylor, R.R. No. 2, Camlachie, Ont.

**THE ALUMNAE ASSOCIATION OF
ST. JOSEPH'S HOSPITAL, CHATHAM, ONTARIO**

Honorary President, Sister M. Baptist; Honorary Director, Sister M. Paschal; President, Miss Hazel Gray; Vice-President, Miss F. Richardson; Secretary, Miss U. Gormly, Wallaceburg, Ont.; Treasurer, Miss Delorme, Chatham.

Representative to "Canadian Nurse" Magazine—Miss Anna Curry.

Sick-Visiting Committee—Mrs. Patterson, Misses McIlgargey and E. Mann.

Regular Meeting—First Monday of each month.

**THE THUNDER BAY GRADUATE NURSES' ASSOCIATION,
FORT WILLIAM AND PORT ARTHUR, ONT.**

Hon. President, Mrs. J. E. Cook; Hon. Member, Sister Francis; President, Miss M. Milne, Port Arthur; Hon. Vice-President, Mrs. B. M. Harvey; 1st Vice-President, Miss S. M. McDougall, Port Arthur; 2nd Vice-President, Mrs. W. J. Sterrett, Port Arthur; 3rd Vice-President, Mrs. Hancock, Fort William; Secretary, Miss Eva Hubman, Fort William; Treasurer, Miss T. E. Gerry, Fort William.

Social Committee—Mrs. O'Leary, Mrs. W. Young, Misses Saunders and Wocker.

Visiting and Flowers Committee—Mrs. Wark, Mrs. Morton, Mrs. Edwards, Mrs. Millar and Miss Forbes.

Private Duty—Miss Fortune, Miss C. M. McLeod.

Membership Committee—Miss McDougall, Mrs. Wark, Miss Saunders, Mrs. Millar.

"Canadian Nurse" Representatives—Mrs. McCallum, Port Arthur; Mrs. Edwards, Fort William.

**THE ALUMNAE ASSOCIATION OF THE WOODSTOCK GENERAL
HOSPITAL TRAINING SCHOOL FOR NURSES**

Hon. President, Miss Frances Sharpe; President, Miss Gladys Mill, R.N.; Vice-President, Miss Winnifred Higgins, R.N.; Recording Secretary, Miss M. H. Mackay, R.N.; Assistant Secretary, Miss Annie Hill, R.N.; Corresponding Secretary, Miss Gladys Jefferson, R.N.; Treasurer, Miss Evelyn Pears, R.N.

Regular Monthly Meeting—Second Monday, 8 p.m.

**THE ALUMNAE ASSOCIATION OF ORILLIA SOLDIERS' MEMORIAL
HOSPITAL**

Honorary President, Miss Eleanor Johnston, R.N., O.S.M.H.; President, Miss S. V. McKenzie, R.N., Orillia; First Vice-President, Miss M. Harvie, R.N., O.S.M.H.; Second Vice-President, Miss M. Glennie, R.N., Orillia; Secretary-Treasurer, Miss G. Went, R.N., Orillia; Recording Secretary, Miss M. Dundas, R.N., O.S.M.H.

Directors—Miss Glennie, R.N.; Miss Gray, R.N.; Miss Mae Lelland, R.N.

Visiting Committee—Miss G. Dridenhoffer, R.N.; Miss Garvey, R.N.; Miss Harvie, R.N.

Programme Committee—Miss Newton, R.N.; Miss Hart, R.N.; Miss Towle, R.N.

Regular Meeting—First Thursday in each month.

**THE SAULT STE. MARIE GENERAL HOSPITAL
ALUMNAE ASSOCIATION.**

Honorary Director, Rev. Sister Acyndina; President, Miss M. Delaney; First Vice-President, Mrs. O'Driscoll; Second Vice-President, Miss S. Kehoe; Secretary-Treasurer, Miss F. Allerdice, General Hospital, Sault Ste. Marie, Ont.

**THE ALUMNAE ASSOCIATION OF ST. BONIFACE HOSPITAL,
ST. BONIFACE, MANITOBA**

Honorary President, Sister Gallant, St. Boniface Hospital; Honorary Vice-President, Sister Letellier, St. Boniface Hospital; President, Miss Alice Chafe, Deer Lodge Convalescent Hospital; second Vice-President, Mrs. A. D. McLeod, Deer Lodge Convalescent Home; Secretary, Miss L. McEwan, 277 Toronto St., Winnipeg; Secretary, Miss Stella Gordon, 251 Stradbroke St.; Treasurer, Miss Theresa O'Rourke, 119 Donald St.

Convenor of Social Committee—Mrs. W. G. Montgomery, 14 Congress Apts.

Convenor of Refreshment Committee—Miss B. Foster, c-o McLean-Gunn Clinic.

Convenor of Sick Visiting Committee—Miss A. Bresman, 753 Wolseley Ave.

Representative to Press—Miss J. McDonald, 753 Wolseley Ave.

Representative to Nurses' Directory—Miss A. C. Starr.

THE MANITOBA ASSOCIATION OF GRADUATE NURSES

President, Miss Elsie Wilson, 798 Grosvenor Avenue, Winnipeg; First Vice-President, Miss Mary Marton, Winnipeg General Hospital; Second Vice-President, Mrs. Darragh, Brandon; Third Vice-President, Rev. Sister Gallant; Treasurer, Miss Wilkins, St. Boniface Hospital, 753 Wolseley Ave.; Recording Secretary, Miss Elizabeth Carruthers, 753 Wolseley Ave.; Corresponding Secretary, Miss Stella M. Gordon, 251 Stradbrooke Ave., Winnipeg.

THE GRADUATE NURSES' ASSOCIATION OF BRANDON

Hon. President, Miss Birtles, Alexander, Manitoba; President, Mrs. R. Darragh, 431 Victoria Ave., Brandon; First Vice-President, Miss M. Gemmell, 253 16th St., Brandon; Second Vice-President, Mrs. G. Howat, 22 Imperial Apartments, Brandon; Registrar, Miss C. McLeod, Superintendent, Brandon General Hospital; Treasurer, Miss Finlayson, Brandon General Hospital; Secretary, Miss Sotthart.

Social Convenor—Miss Sutherland, Victoria Ave., Brandon.

Sick Visitor—Mrs. Pierce, 1608 Lorne Ave., Brandon.

Press Representative—Mrs. W. W. Kidd, 14 Imperial Apartments, Brandon.

THE GRADUATE NURSES' ASSOCIATION OF MOOSE JAW, SASK.

Honorary Advisory President, Mrs. Harwood, 430 Athabaska W.; Honorary President, Mrs. Humber, 662 Stadacona W.; President, Miss H. Riddell, 813 Second N.E.; 1st Vice-President, Miss Eisele, Superintendent General Hospital; 2nd Vice-President, Miss Shepherd, York Hospital; Secretary-Treasurer, Miss C. M. Kier, Y.W.C.A.; Press Representative, Mrs. Lydiard, 329 Third N.E.; Social Service Committee, Mrs. Hedley, 1155 Grafton; Convenor Finance Committee, Miss Lind, 176 Hochelaga W.; Convenor Educational Committee, Mrs. Metcalf, 37 Hochelaga W.; Convenor Social Committee, Miss Clarke, General Hospital; Convenor Registration Committee, Miss L. Wilson, 1159 Alder Avenue; Convenor of Constitution and By-laws Committee, Miss Hunter, Cottage Hospital.

SASKATCHEWAN REGISTERED NURSES' ASSOCIATION

Incorporated March, 1917

President, Miss R. M. Simpson, Department of Education, Regina; First Vice-President, Miss E. Eisele, General Hospital, Moose Jaw; Second Vice-President, Sister Mayer, St. Paul's Hospital, Saskatoon; Secretary-Treasurer, Miss Mabel F. Gray, 2331 Victoria Avenue, Regina.

Councillors—Miss M. Montgomery, Sanitarium, Fort Qu'Appelle; Mrs. Feeney, School Hygiene Staff, Yorkton.

MEDICINE HAT GRADUATE NURSES' ASSOCIATION

President, Miss E. M. Auger, General Hospital; First Vice-President, Mrs. John Hill, 268—8th St., S.E.; Second Vice-President, Mrs. F. W. Gershaw, 826—2nd St., S.E.; Treasurer, Miss A. L. MacPherson, General Hospital; Secretary, Miss E. G. McNally, General Hospital.

Executive Committee—Mrs. H. C. Dixon, 816—2nd St., S.E.; Mrs. R. Hayward, 241—3rd St., S.E.; Miss A. Nash, Isolation Hospital.

Flower Committee—Mrs. C. A. Anderson, 335—1st St., S.E.

"Canadian Nurse" Correspondent—Miss M. Davidson, 27—4th St., S.W.

"Canadian Nurse" Representatives—Mrs. R. Hayward, 241—3rd St., S.E.; Miss E. G. McNally, General Hospital.

Regular Meeting—First Monday in each month.

CALGARY ASSOCIATION OF GRADUATE NURSES

Honorary President, Mrs. Stuart Brown, 2417—14th Ave., W.; President, Mrs. A. H. Calder, 510—10th St., W.; First Vice-President, Miss Dewar, 326—18th Ave., W.; Second Vice-President, Miss Willison; Recording Secretary, Miss Fraser; Corresponding Secretary, Miss Olin, 2012 Second St., W.; Treasurer, Miss N. B. D. Hendrie, 811 Nineteenth Ave., W.; Registrar, Miss M. E. Cooper, 1412 First St., W.

Delegates to L.C.W.—Mrs. R. P. Stuart, Miss Agnes Kelly, and Miss Dewar.

Sick Committee—Misses Ashe and Ballard.

Finance Committee—Misses Agnes Kelly and Maclear.

Books Committee—Misses Quance and McLearn.

Entertainment Committee—Miss Cooper.

Committee for "Canadian Nurse" Magazine Subscriptions—Misses Cooper and Phillips.

THE EDMONTON GRADUATE NURSES' ASSOCIATION

President, Miss Olive Ross; Vice-President, Miss Brazier; Secretary, Miss J. E. Martin; Assistant Secretary, Miss A. A. Kennedy; Treasurer, Miss Fallows; Registrar, Miss Sproule.

Members of Executive—Mrs. Manson, Miss Shearer.

ALBERTA ASSOCIATION OF GRADUATE NURSES

Incorporated April 19, 1916

President, Mrs. K. Manson, Royal Alexandra Hospital, Edmonton; First Vice-President, Miss L. M. Edy, Calgary; Second Vice-President, Miss F. S. Macmillan, Edmonton; Secretary-Treasurer and Registrar, Miss E. McPhedran, Central Alberta Sanitarium, Calgary.

Councillors—Miss E. M. Rutherford, Calgary; Miss E. M. Auger, Medicine Hat; Mrs. N. Edwards, Edmonton.

OFFICERS OF THE GRADUATE NURSES' ASSOCIATION OF BRITISH COLUMBIA

President, Miss Elizabeth Breeze, R.N.; First Vice-President, Miss J. F. MacKenzie, R.N.; Second Vice-President, Miss Marion Currie, R.N.; Registrar, Miss Helen Randal, R.N.; Secretary, Mrs. M. E. Johnston, 125 Vancouver Block, Vancouver, B. C.

Councillors—Misses K. Ellis, R.N., Katharine Stott, R.N., L. McAllister, R.N., M. Ethel Morrison, R.N., Charlotte Black, R.N., L. Archibald, R.N., and A. L. Boggs, R.N.

VANCOUVER GRADUATE NURSES' ASSOCIATION

President, Miss A. McLellan, R.N.; First Vice-President, Miss Marion Currie, R.N.; Second Vice-President, Miss E. Cameron, R.N.; Secretary-Treasurer, Miss J. Johnston, R.N.

Executive Committee—Misses K. Ellis, R.N., E. Hall, R.N., E. Roos, R.N., J. Matheson, R.N., M. Ewart, R.N., M. Campbell, R.N.

Regular Meeting—First Wednesday of each month.

THE ALUMNAE ASSOCIATION OF THE VANCOUVER GENERAL HOSPITAL

Honorary President, Miss K. Ellis, R.N.; President, Miss M. McLane, R.N.; First Vice-President, Miss L. Woodrow, R.N.; Second Vice-President, Miss Snelgrove, R.N.; Secretary-Treasurer, Mrs. R. Stevens, 212 Nineteenth Avenue, West, Vancouver.

Convenors of Committees—Sick-Visiting, Mrs. E. Carder; Refreshments, Miss V. Page; Programme, Miss H. Bennett; Sewing, Mrs. Gallagher; Press, Miss G. Watson.

Regular Meeting—First Tuesday in the month.

THE ALUMNAE ASSOCIATION OF ST. PAUL'S HOSPITAL, VANCOUVER, B. C.

Hon. President—Rev. Sister Clarissa, Superior, St. Paul's Hospital; President, Miss Muriel Wilkinson, R.N., 1008 22nd Ave., E.; Hon. Vice-President, Rev. Sister Mary Adolphson, R.N., St. Paul's Hospital; Vice-President, Mrs. D. MacLure, R.N., Manhattan Apartments; Secretary-Treasurer, Miss Lena Wirth, R.N., 1448 Nelson St., Doug, 2400R.

Executive Committee—Miss Jennie Campion, Miss Blanche Lord, Miss Elva Stevens, Miss Alix Kerr, Miss Jennie Morton.

Regular Meeting—First Tuesday in each month.

PROVINCIAL ROYAL JUBILEE HOSPITAL ALUMNAE ASSOCIATION VICTORIA, B. C.

Hon. President, Miss J. F. Mackenzie, R.N., Director of Nurses, Jubilee Hospital; President, Mrs. W. Bullock-Webster, 1073 Davie St., Victoria; First Vice-President, Mrs. M. W. Thomas, 235 Howe St.; Second Vice-President, Miss M. C. Macdonald, 800 St. Charles St.; Treasurer, Miss E. Gurd, 733 Lampson St., Esquimalt, B. C.; Secretary, Mrs. W. C. Wilson, 1701 Stanley Ave., Victoria; Assistant Secretary, Miss May Wood, 915 Oliver St., Oak Bay.

Convenor of Entertainment Committee—Mrs. L. S. V. York, 1140 Burdette Ave., Victoria.

Regular Business Meeting—Second Monday of each quarter.